

May 2025 to
June 2026

The Women in Sunderland Hope,
Education, Development (WISHED)
Project: Evaluation at the end of the
pilot programme



Figure 1: "The calm of Spring" - WISHED – 13th April 2026

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Acknowledgements

The WISHED Project is led by The Barn at Easington and commissioned by City of Sunderland Council. Other partners in the programme are WWIN Domestic Abuse Services, Change Grow Live (Sunderland's commissioned drug and alcohol treatment service), and Sunderland's Housing Options Team.

The Barn at Easington has not only led the project but has provided a uniquely enabling, nature-based environment which has been central to the relational, trauma-informed approach and the outcomes achieved for both participants and partners. The project is grounded in a setting that has allowed women and professionals alike to experience safety, connection and reflection in ways not typically possible within more traditional service environments.

Two of the 'lived experience' practitioners who delivered the programme are also involved in developing the FREE (Female Recovery through Experience and Empowerment) Women's Community in County Durham, in partnership with Durham Agency Against Crime. Their contribution has strengthened the authenticity, relevance and effectiveness of the WISHED model.

The evaluation was undertaken by Dr Sue Robson, who brings over 40 years' experience in feminist community development, alongside extensive expertise in evaluation and action research. The ethos underpinning this work is deeply informed by lived experience, relational practice and a commitment to more compassionate, emancipatory approaches to supporting women.

We would like to extend our deepest thanks to all the women who participated in the WISHED programme. Your honesty, courage and willingness to share your experiences have been central to this work. The insights drawn from your reflections, conversations and journeys through the programme have shaped not only the outcomes observed, but also the wider learning for practice, partnership working and system change.

We also acknowledge the commitment of practitioners, artists and partner organisations who engaged in the programme and in the associated learning events. Your openness to reflection, dialogue and challenge has contributed significantly to the insights captured in this report and to the emerging understanding of how systems can better respond to women with multiple, enduring and overlapping unmet needs.

Finally, we recognise that this work is part of a wider, ongoing effort to create more compassionate, relational and effective systems of support. The WISHED programme has been made possible through collaboration, trust and shared commitment across organisations and individuals, all working towards a common goal: to improve the lives of women in Sunderland who have too often been underserved by existing systems.

Executive Summary

1. What the WISHED programme is

The Women in Sunderland Hope, Education, Skills and Development (WISHED) programme is a trauma-informed, relational, arts and nature-based intervention for women with multiple, enduring and overlapping unmet needs, including trauma, addiction, domestic abuse and insecure housing.¹ It was delivered over a twelve-month pilot period between May 2025 and April 2026 at The Barn at Easington, in partnership with City of Sunderland Council, Change Grow Live (Wear Recovery), WWIN Domestic Abuse Services, and Sunderland Housing Options.

The evaluation demonstrates that WISHED is not simply a supportive programme located at The Barn, but a model whose effectiveness is intrinsically linked to The Barn's safe, non-institutional and nature-based environment. Across participant, practitioner and partner evidence, The Barn emerges not as a backdrop to delivery, but as a central enabling condition for trust, reflection, emotional safety, relational depth and engagement.

2. Who took part and how the evaluation was conducted

A total of 20 women participated in the WISHED programme across three tranches of eight arts and nature-based sessions. The evaluation used a mixed-method, relational and iterative approach, combining baseline and end-of-programme wellbeing measures, weekly participant reflection sheets, participant focus groups, practitioner reflective sessions, partner learning events and partner survey feedback.

This approach provides robust evidence of both measurable change and lived experience impact, alongside wider learning about practice, partnership working and system-level change. The evaluation was designed not only to assess outcomes for women, but also to understand how learning from WISHED could inform organisational practice, commissioning and system design.

3. Key findings: transformational outcomes for women

The evaluation demonstrates clear, consistent and meaningful improvements in women's wellbeing, confidence, emotional stability, connection and hope. Across all three tranches, women moved from isolation toward connection, from instability toward greater emotional regulation, and from low self-worth toward increased confidence and agency. Weighted wellbeing scores improved across every WEMWBS domain, with particularly strong gains in feeling loved, being interested in new things, feeling close to others, optimism about the future and feeling good about oneself.¹

Participant reflections reinforce the depth of this change. Women described the programme as a “safe space”, “safe haven”, and “lifeline”, and reported feeling calmer,

¹ The term “women with multiple, enduring and overlapping unmet needs”, replaces the term “women with complex needs” throughout this report, as it is deemed from the evidence presented that is the systems that women must negotiate to have their needs met is where the complexity lies.

more connected, more reflective and more able to manage difficult emotions. Some women described the programme as life-changing, including statements such as:

“This project has given me back my self-confidence”,

“This time last year my life was out of control, today I am at peace”, and “The WISHED project has literally saved my life.”

The programme was particularly effective in engaging women who were not being effectively supported by existing services, including women in active addiction, women with histories of trauma and violence, and women affected by insecure housing, hidden homelessness or social isolation.

4. What made WISHED effective

The evaluation shows that WISHED works because of the integration of environment, relationships and practice. The programme’s impact is rooted in:

- a) A safe, welcoming and non-judgemental environment.
- b) The calming and regulating effects of nature-based practice.
- c) Opportunities for creativity, reflection and shared experience.
- d) Relational, compassionate and flexible support.
- e) Lived experience, peer connection and authentic practitioner engagement.

Importantly, these elements are not separate. The evidence suggests that The Barn at Easington and the nature-based setting are central to the mechanism of change. Women consistently describe the environment as helping them feel safe, at ease and able to open up. Practitioners identify nature, meditation, creativity and the relational atmosphere as core to outcomes. Partner feedback also highlights The Barn as a uniquely enabling space for reflection, dialogue and shared learning.

5. Impact beyond participants: system learning and partner change

WISHED has had significant influence beyond direct participant outcomes. It has acted as a catalyst for **system-wide learning, reflection and challenge**, particularly through the three partner learning events held across the pilot period. Feedback from these events shows a consistent strengthening narrative: partners increasingly came to see current systems as too rigid, fragmented and compliance-led to meet the needs of women experiencing multiple disadvantage.

Across the learning events, participants described the sessions as *“inspiring”, “impactful”,* and giving them time to *“stop and think collectively”,* with growing consensus around the need for trauma-informed, relational and more flexible responses. The events enabled diverse partners to develop shared understanding, challenge existing assumptions, and build commitment to improved multi-agency responses.

The evaluation also demonstrates that **The Barn at Easington was central to this partner learning process**. It created a space in which professionals could move beyond institutional defensiveness, reflect openly, and envisage different ways of working. In this sense, The Barn functioned not only as a delivery site for women, but also as a practical demonstration of the values and conditions that WISHED seeks to embed across the wider system.

6. Key system learning

The programme has strengthened trauma-informed, person-centred and gender-responsive thinking across partner organisations. It has challenged narrow definitions of vulnerability, including strict interpretations of homelessness and risk, and has highlighted the limitations of systems that exclude women for being “too complex” or insufficiently compliant. Partners identified the need for:

- More flexible and relational practice.
- Increased women-specific provision and safe environments.
- Stronger integrated pathways across housing, domestic abuse, substance use and health.
- More meaningful co-production and lived experience involvement.
- Commissioning approaches that prioritise engagement, prevention and outcomes over process.

These themes are reinforced by Sunderland-specific evidence from the Sunderland PLUS research, which identifies significant barriers for people affected by homelessness, substance use and trauma, including stigma in services, poor continuity of care, missed windows of opportunity for engagement, and system barriers linked to access, waiting times and fixed-address requirements.²

7. Social Return on Investment (SROI)

The evaluation identifies three tiers of value generated by the WISHED model: The pilot programme generated **£4–£7 of social value for every £1 invested**, based on direct outcomes for women.

A fully resourced delivery model is estimated to generate **£2–£3 per £1 invested**, reflecting the cost of sustained, intensive support.

Most significantly, **systemic embedding of the WISHED model could generate net public service savings of £8,000–£20,000 per woman per year**.

To illustrate the scale of this opportunity, indicative modelling suggests:

- **50 women** → approximately **£500,000 annual saving**
- **100 women** → approximately **£1 million annual saving**
- **200 women** → approximately **£2 million+ annual saving**

These projections demonstrate that while WISHED is cost-effective as a stand-alone programme, **its greatest economic value is realised when the model is embedded across systems**.

WISHED is cost-effective as a programme, but cost-saving as a system.

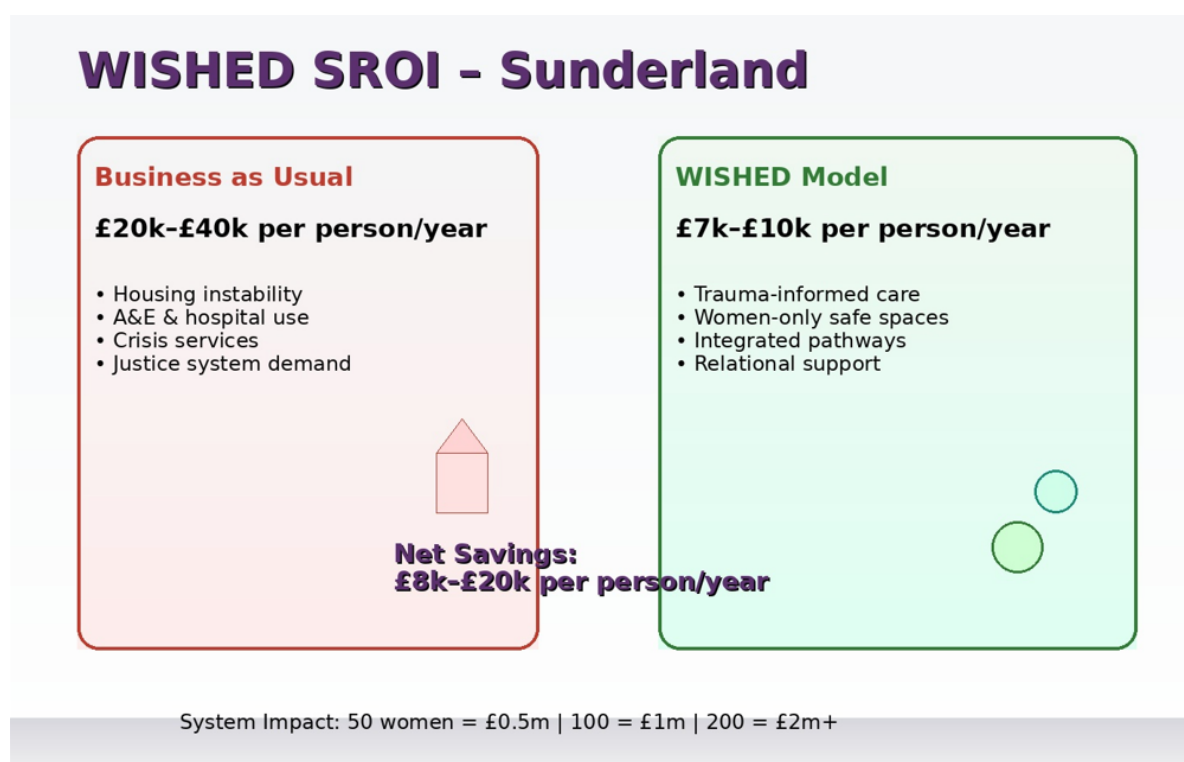


Figure 2: Illustrating indicative SROI cost savings of systemically embedding the WISHED programme

8. Recommendations and future direction

The report's recommendations focus on embedding learning across services and systems, rather than immediate large-scale replication of the pilot. Key priorities are:

- Embedding trauma-responsive, relational practice across partner services.
- Increasing women-specific provision, including safe and supportive environments.
- Strengthening integrated, cross-agency approaches for women with multiple, enduring and overlapping unmet needs.
- Supporting co-production and lived experience within service design.
- Using the WISHED model to inform commissioning, policy and system design, including the appropriate use of equality act 2010 single sex exemptions to enable women-only provision where justified.

The recommendations remain appropriate and are strengthened, not displaced, by the newer evidence. In particular, recent qualitative data suggests that future systems should understand **safe, nature-based, relational environments not as optional enhancements, but as central to what makes engagement and recovery possible for this cohort.**

9. Overall conclusion

The WISHED programme is a highly effective, evidence-based and innovative model for supporting women with multiple, enduring and overlapping unmet needs. Its greatest value lies not only in the transformational outcomes achieved for participants, but in the

clarity, it provides about **what effective support looks like, where it works best, and how systems need to change.**

The evaluation shows that WISHED works because it integrates **trauma-informed relational practice, women-only safety, creativity, community and the restorative power of nature** within a setting that enables trust and connection. The Barn at Easington is central to this model. It is not simply where the programme happened, but an active part of why it worked—for women, for practitioners and for partner organisations.

WISHED therefore provides both a practical demonstration and a strategic case for change: a model that improves outcomes, informs practice, strengthens partnership working, and offers a credible route to reducing long-term demand on public services. In a context of increasing pressure on local systems, it demonstrates that compassionate, relational and nature-based approaches are not peripheral to effective service design, but central to it.

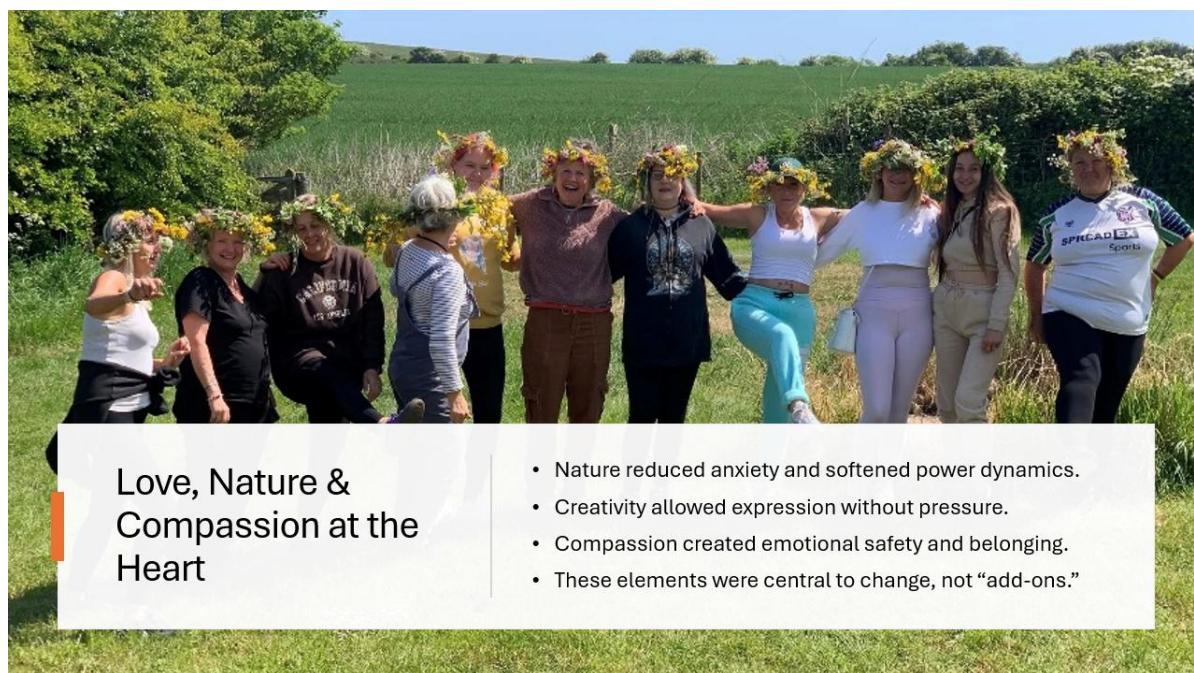


Figure 3: The WISHED Project: ‘Doing things differently’ – Part of the briefing for the Public Health & Well-being, full-team, 23.2.2026.

1. Introduction

This report presents an evaluation of a year-long pilot of the WISHED programme that took place at The Barn at Easington over three sets of eight arts and nature-based sessions between 12 May 2025 and 28 April 2026.

The WISHED programme was developed with and for women experiencing trauma, domestic abuse, addiction and insecure housing. It brought together women facing multiple, enduring and overlapping unmet needs within a supportive, nature-based environment.²

The pilot model of delivery aimed to empower women through creative expression while providing informal and relational support and fostering a sense of community. The programme was delivered in collaboration with key stakeholders, enabling a coordinated approach to addressing the complex and interrelated challenges faced by the women participating.

- The primary objectives of the programme were to:
- Provide a safe and supportive environment for creative expression within nature.
- Foster community connections and support networks among participants.
- Enhance wellbeing, self-esteem and resilience through nature, arts and community.

In addition, the WISHED programme sought to:

- Create a holistic, wrap-around model of support to build resource and resilience.
 - Provide a space to explore and inform understanding of risk and support needs, particularly in relation to substance use.
- b) Contribute to the development of meaningful practice with women with multiple, enduring and overlapping unmet needs, across practitioners, services, commissioners and policy contexts.



Figure 4: “Our journey together” Last WISHED session of Tranche 3, 27th April 2026

² The term “women with multiple, enduring and overlapping unmet needs”, replaces the term “women with complex needs” throughout this report, as it is deemed from the evidence presented that is the systems that women must negotiate to have their needs met is where the complexity lies.

2. Key findings against anticipated outcomes

Participants entered the programme with significantly low baseline wellbeing and multiple, enduring and overlapping unmet needs, including trauma, addiction, domestic abuse and housing instability.

Across all three Tranches, there is strong and consistent evidence of a sustained trajectory of change, with participants moving from:

Isolation → connection.
Instability → emotional regulation.
Low self-worth → confidence and agency.

Importantly, findings from reflections, practitioner insights and partner survey data demonstrate that the WISHED programme is not only achieving its anticipated outcomes for women, but is also informing and influencing professional practice, service delivery and system thinking across partner organisations. This dual impact highlights WISHED as both:

- An effective intervention for women, and
- A catalyst for wider system learning and change.

2.1 A safe and supportive environment for creative expression within nature

Across all three Tranches, the WISHED programme has successfully created a safe, welcoming and non-judgemental environment, consistently identified as fundamental to engagement and progress.

Participants describe this as a “*safe space and a safe haven*”, where they feel able to be open, vulnerable and themselves.

Weekly reflections and practitioner observations demonstrate that the natural setting and creative activity support:

- Emotional regulation and calmness.
- Reduction in anxiety and overthinking.
- Increased ability to be present and reflective.

Partner feedback reinforces the significance of this environment, highlighting how WISHED has increased understanding across organisations of the importance of psychological safety and non-judgemental spaces, particularly for women who may distrust or avoid traditional services.

Conclusion: The programme provides a psychologically safe, nature-based environment, which is essential for engagement, trust and healing, and offers a model for creating accessible, trauma-responsive spaces across services.

2.2 Foster community connections and support networks among participants

The WISHED programme has been highly effective in reducing isolation and building meaningful peer relationships. Participants consistently report:

- Forming friendships and reconnecting with others.
- Feeling “part of something.”
- Increased connection, belonging and mutual support.

Quantitative data (WEMWBS) shows significant improvements in:

- Feeling loved.
- Feeling close to others.
- Interest in other people.

Practitioners describe this transformation as women:

“Coming as strangers and leaving becoming sisters.”

Partner survey findings reinforce that this relational aspect is critical, highlighting increased recognition across services of the importance of connection and trust as central mechanisms of engagement and recovery, rather than secondary outcomes.

Conclusion: WISHED fosters strong peer networks and a sense of belonging, which are both key outcomes and essential drivers of change, and provide important learning for relational approaches within wider services.

2.3 Enhance well-being, self-esteem, and resilience through nature, arts, and community

Across all Tranches, there is clear and consistent improvement in mental wellbeing, with measurable gains across all WEMWBS indicators. Participants report:

- Increased calmness and emotional regulation.
- Greater confidence and self-worth.
- Improved optimism and ability to cope.
- Renewed sense of identity and possibility.

These improvements are reflected in strong qualitative evidence, including statements such as:

“This project has given me back my self-confidence.”

“This time last year my life was out of control, today I am at peace.”

Partner learning indicates that these outcomes are influencing how services understand recovery, reinforcing the need to recognise emotional stability, confidence and

connection as core indicators of progress, rather than focusing solely on compliance or immediate behavioural change.

Conclusion: The programme delivers significant, sustained improvements in wellbeing, confidence and resilience, supporting meaningful and lasting change and reshaping how outcomes are understood within partner systems.

2.4 Creating a holistic wrap-around service for women to help build resource and resilience

The WISHED programme provides a holistic, relational and flexible model of support, combining:

- Nature-based practice.
- Creative expression.
- Peer support.
- Informal practitioner and multi-agency input.

Key features include:

- Meeting women “*where they are.*”
- Supporting both active addiction and recovery.
- Providing continuity, flexibility and relational engagement.

Partner survey findings highlight that this holistic model has influenced thinking across organisations, increasing awareness of the need for integrated, cross-agency approaches and more coordinated support pathways for women with multiple needs.

Conclusion: WISHED successfully delivers *a wrap-around model*, addressing multiple needs simultaneously and providing a strong example of integrated, person-centred support.

2.5 Discussing and informing risk and support information, especially around current substance use

The programme provides a safe and informal space to explore risk, vulnerability and recovery, particularly in relation to substance use. Participants demonstrate:

- Increased openness in discussing challenges.
- Improved awareness of risk and support options.
- Engagement with recovery pathways, including relapse-aware engagement.

Partner survey findings show that WISHED has influenced organisational thinking around risk, prompting:

- Greater recognition of hidden and contextual risk.
- Increased emphasis on Trauma-responsive and gender-responsive approaches.
- Awareness that traditional risk models may overlook complexity.

Conclusion: WISHED provides a critical space for risk awareness and recovery support, while contributing to improved understanding and practice in risk management across partner organisations.

2.6 Impacting upon meaningful practice with females with enduring and multiple unmet needs

The WISHED programme demonstrates a highly effective model of practice for women with multiple, enduring and overlapping unmet needs.

2.6.1 Engagement with unmet need

Participants were not achieving outcomes through existing services, with WISHED acting as a primary pathway for engagement.

2.6.2 Trauma-responsive, relational practice

The programme is grounded in:

- Trust, empathy and non-judgement.
- Authentic relationships.
- Emotional safety.

2.6.3 Alternative to traditional service models

WISHED offers a clear contrast to traditional approaches described as:

- Hierarchical.
- Process-driven.
- Risk-averse.
-

In contrast, WISHED demonstrates: *Compassionate, flexible and relational practice.*

2.6.4 Wider system learning

Partner survey findings provide strong evidence that the programme is influencing:

- Practice development across organisations.
- Service delivery and commissioning discussions.
- Cultural shifts toward Trauma-responsive and compassionate practice

While formal policy change is still emerging, WISHED is clearly contributing to system-wide learning and cultural change.

2.7 Overall conclusion from key findings

Across all anticipated outcomes, the WISHED programme demonstrates:

- Consistent improvements in wellbeing, confidence and emotional stability.
- Strong relational and community outcomes.
- Effective engagement with women not supported by existing services.
- A holistic, trauma-responsive and relational model of practice.

Participants show deep and sustained change, moving toward:

- Stability and recovery.
- Increased self-worth and agency.
- Reconnection with others and life opportunities.

In addition, the programme demonstrates significant wider impact beyond participants, acting as a catalyst for:

- Practice development.
- Cross-agency learning.
- Emerging change in service delivery and commissioning approaches.

Overall conclusion: The WISHED programme represents a highly effective and innovative model, achieving its anticipated outcomes for women while also contributing to wider system transformation in how services understand and respond to complex, trauma-related need.

2. Social Return on Investment (SROI): Integrated Analysis

3.1 Overview: A three-tier SROI framework

The evaluation identifies **three distinct, but related levels of social and economic value** generated by the WISHED model. These levels are analytically different and should not be read as competing SROI calculations, but as a framework for understanding the value of WISHED at different scales of implementation. The three tiers are:

- a) **The SROI of the WISHED pilot programme** – the actual value generated through delivery of the 2025–2026 pilot.
- b) **The indicative SROI of an uplifted WISHED service specification** – the projected value of delivering a more intensive and sustainable future WISHED model at The Barn at Easington.
- c) **The indicative SROI of embedding the WISHED model systemically** – the projected public service savings that may arise if the relational, trauma-responsive and nature-based principles of WISHED are embedded more widely across services, pathways and commissioning in Sunderland

Taken together, these three tiers show that WISHED generates value in its own right as a programme, but that the **greatest long-term economic return is likely to be achieved when the model informs wider system change**, rather than being delivered in isolation.

3.2 Tier 1 – Social Return on Investment of the WISHED pilot programme (2025–2026)

The first tier of analysis concerns the **actual pilot programme delivered between May 2025 and April 2026**. This is the most evidence-based and directly measurable level of SROI in the report.

The WISHED pilot supported **20 women** over a twelve-month period through three tranches of arts and nature-based sessions delivered at The Barn at Easington. The annual investment in the pilot was estimated at **£40,000–£48,000**, with a per-participant cost of approximately **£2,000 per year**.

Using measured improvements in wellbeing, participant reflection data, practitioner evidence and partner learning, the evaluation estimated that the WISHED pilot generated

between **£185,000 and £219,000** of annual social value, with a wider reporting range of **£192,000–£336,000** depending on assumptions applied.

This produces an estimated Social Return on Investment of approximately: **£4–£7 of social value for every £1 invested.**

This pilot-level value is driven by a combination of:

- Improved mental health and emotional regulation.
- Increased confidence, self-worth and agency.
- Reduced social isolation.
- Reduced risk of homelessness and instability.
- Reduced demand on crisis services.
- Increased social connection and belonging.

The evaluation also notes that these figures are likely to be **conservative**, because many wider system effects were not included within the pilot SROI calculation, including changes in professional practice, stronger cross-agency collaboration, and the influence of WISHED on service development and commissioning discussions.

In summary, the pilot SROI demonstrates that WISHED is a **high-value, low-cost intervention** for a cohort of women with multiple, enduring and overlapping unmet needs who were not being effectively supported by existing systems prior to engagement.

3.3 Tier 2 – Indicative SROI of an uplifted WISHED service specification

The second tier of analysis relates to the **proposed revised service specification** for a future WISHED programme. This reflects learning from the pilot about the level of intensity, staffing, transport and reflective practice required to deliver the model safely and effectively at a higher and more sustainable level.

The revised service specification proposes a **12-month rolling programme of 36 sessions per year**, supporting approximately **25–30 women annually**, with a high staff-to-participant ratio and stronger infrastructure around transport, reflection, evaluation and coordination.

The indicative annual cost of this revised programme is estimated at **£86,500**, with a cost per participant of approximately:

- **£3,460** based on 25 women.
- **£2,883** based on 30 women. At this delivery level, the programme is estimated to generate: **£2–£3 of social and economic value for every £1 invested.**

The reduction in ratio compared with the pilot SROI should **not** be interpreted as lower effectiveness. Rather, it reflects the higher cost of delivering a safer, more realistic and more sustainable model at increased scale, including:

- Maintaining quality and safety.
- Sustaining high staff support for complex need.
- Investing in transport access.
- Strengthening reflective practice and evaluation.

- Valuing lived experience and volunteer support ethically.

This tier shows that **running another WISHED programme at The Barn remains a strong and positive investment**, particularly for women with the highest levels of unmet need. However, the return is lower than the pilot-level ratio because the model is being costed more fully and more realistically for sustained delivery.

Importantly, this analysis also suggests that while continued delivery of WISHED would continue to generate meaningful benefit, **delivery alone does not fully realise the wider economic value of the model**. Much of the programme's broader potential lies in how its principles are translated into wider system design, not only in repeating the intervention itself.

3.4 Tier 3 – Indicative SROI of embedding the WISHED model systemically

The third tier of analysis considers the **wider public service value of embedding the WISHED model more systematically across Sunderland**, rather than treating it solely as a standalone programme. This tier is indicative rather than directly measured and is based on a combination of local evaluation findings and national cost-benefit evidence on homelessness, crisis demand and Housing First-type interventions.

The evaluation suggests that if the core principles of WISHED — namely trauma-responsive practice, relational engagement, women-specific safe provision, integrated support, early intervention and system flexibility — were embedded more widely across services and pathways, the model could reduce long-term demand on a range of high-cost services.

This analysis draws on the following national cost benchmarks:

- **£12,260 per person per year** as the estimated average annual fiscal cost of rough sleeping.³
- Up to **£20,128 per person per year** as a historic estimate of the cost of rough sleeping for twelve months.⁴
- Housing First pilots in England averaged a spend of **£7,700 per person per year**, with estimated long-term savings of **£15,880 per person per year**.⁵
- Using these benchmarks alongside the Sunderland-specific evidence about unmet need, exclusion, crisis escalation and fragmented support pathways, the report estimates that systemic embedding of the WISHED model could generate **net public service savings of approximately £8,000–£20,000 per woman per year**, depending on prior cost intensity.⁶⁷

For reporting purposes, a conservative midpoint of **£10,000 net saving per woman per year** has been used. Illustrative system-level scenarios demonstrate the scale of potential impact:

- **50 women** → approximately **£500,000 annual saving**.
- **100 women** → approximately **£1 million annual saving**.
- **200 women** → approximately **£2 million+ annual saving**.

These projections provide a clear indication that **the primary economic opportunity lies at system level**, rather than within programme delivery alone.

- Reduced demand on homelessness and housing crisis services.
- Reduced A&E attendance and hospital admissions.
- Earlier treatment of unmet physical health needs.
- Reduced crisis intervention and safeguarding escalation.
- Improved transitions through prison release, treatment and housing pathways.⁸
- Reduced duplication, inefficiency and system churn.

This third tier therefore presents the **greatest potential return on investment**, but it is also the most dependent on wider system change. It assumes that the principles of WISHED are embedded across practice, commissioning, pathways and service environments, rather than being delivered as a standalone programme alongside an unchanged system.

In this context, the evidence suggests that:

Scaling the model systemically generates significantly greater value than repeating the programme in isolation.

3.5 Integrated interpretation of the three tiers

Taken together, the three tiers of SROI provide a clear and coherent picture of the value of WISHED at different levels of implementation.

Tier 1: Pilot-level SROI

The pilot demonstrates that WISHED is a **highly effective, high-value intervention** for women with multiple and enduring unmet needs, with a strong return on investment of **£4–£7 per £1 invested**.

Tier 2: Delivery-level SROI

An uplifted future WISHED programme remains a **valuable and worthwhile investment**, but because it is more fully costed and resourced, the indicative return reduces to **£2–£3 per £1 invested**.

Tier 3: System-level SROI

The greatest economic return is likely to be achieved when WISHED is treated not only as a programme, but as a **system model**, with indicative potential savings of **£8,000–£20,000 per woman per year** when its principles are embedded more widely.

The key implication of this analysis is that **delivering another WISHED programme at The Barn without embedding the wider systemic learning is likely to generate a lower return than using WISHED to reshape the wider system**.

This does **not** mean that future WISHED delivery lacks value. On the contrary, continued delivery remains important for women currently excluded or underserved by mainstream provision, and The Barn at Easington remains central to what makes the model effective. However, the analysis suggests that the **greatest public value lies in combining delivery with systemic influence**, so that the relational, trauma-responsive and nature-

based elements of the model are reflected in wider services, pathways and commissioning approaches.

In this sense, the SROI analysis supports the central argument of the report: WISHED is cost-effective as a programme but potentially cost-saving as a system. **At scale, this translates into potential annual savings in the region of £1 million for every 100 women supported through a system-wide approach.**

3.6 Overall conclusion of the integrated SROI analysis

The integrated SROI analysis demonstrates that WISHED generates substantial social and economic value at multiple levels. As a pilot, it delivers strong and measurable outcomes for women who were not effectively supported by existing services. As a future delivery model, it remains a worthwhile investment when adequately resourced. As a system model, it offers the potential for significantly greater public service savings if its principles are embedded across the wider system.

The financial case and the moral case are therefore aligned. The relational, trauma-responsive, women-specific and nature-based elements that make WISHED effective for women are the same elements most likely to improve system performance and reduce long-term demand.

This means that future investment decisions should not be framed simply as whether to run another WISHED programme, but how to maximise the value of the WISHED model across delivery, partnership working, commissioning and wider system design.

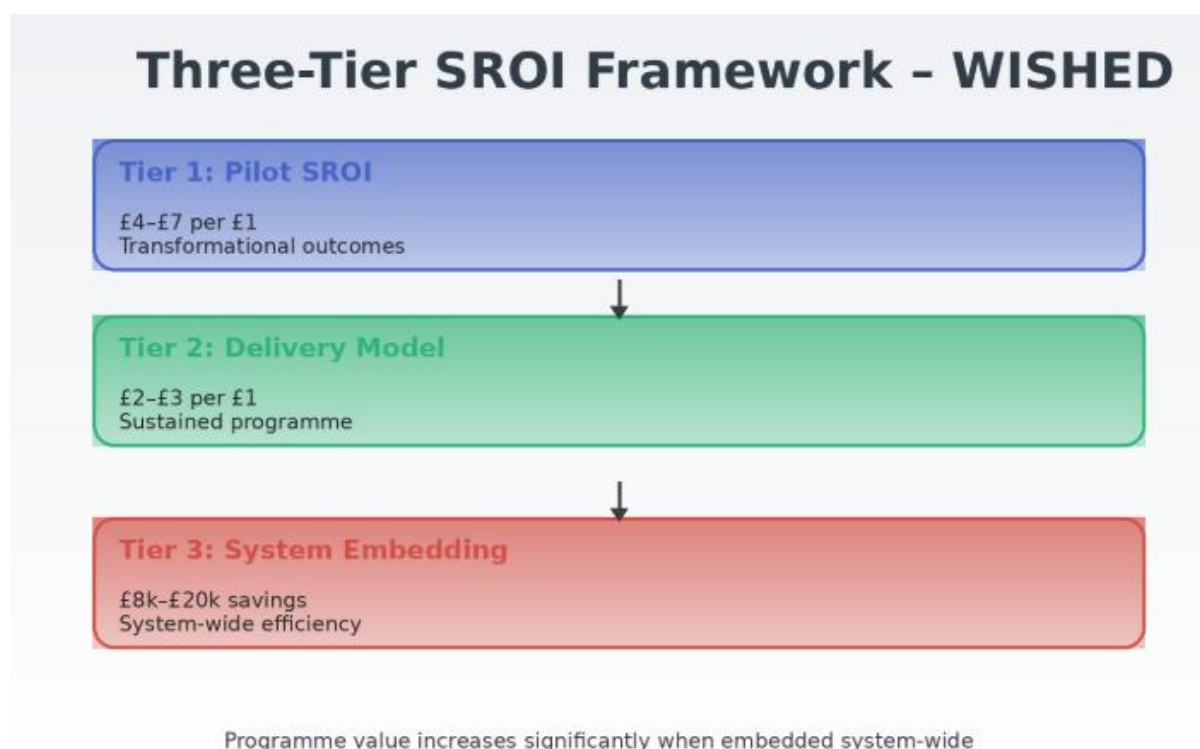


Figure 5: Three-tier Social Return on Investment (SROI) framework for WISHED

4. Recommendations

The findings from the WISHED pilot programme demonstrate both transformational impact for participants and significant learning for wider systems, organisations and commissioning approaches.

Given current delivery capacity at The Barn at Easington and the resource intensity required to support women with multiple, enduring and overlapping unmet needs, future recommendations focus on:

- Sustaining and extending impact through system influence, rather than immediate replication.
- Embedding learning into practice, commissioning and policy frameworks.
- Supporting partner organisations to translate and adapt the WISHED model within existing provision.

4.1 Recommendations for future practice

4.1.1 Sustain the WISHED approach and maintain continuity opportunities where possible

The WISHED programme has demonstrated significant value for participants, with consistent evidence of improved wellbeing, confidence, connection and recovery trajectories.

Recommendation:

- Maintain opportunities for continued engagement for women who have participated in the pilot where feasible.
- Support pathways into complementary provision (e.g. nature-based, creative, recovery or community programmes) to sustain outcomes.
- Protect the core elements of the WISHED model, including:
 - Safe, non-judgemental spaces.
 - Nature-based and creative activity.
 - Relational, trauma-responsive practice.
 -

4.1.2 Prioritise depth, not scale, in future delivery models

The evaluation demonstrates that outcomes are linked to:

- High staff-to-participant ratios.
- Relational practice.
- Flexibility and continuity of support.

Recommendation:

Recognise that effective delivery for this cohort requires intensive, relational support. Avoid diluting the model in attempts to scale without sufficient resource.

Where future provision is developed, prioritise quality and relational depth over volume.

4.2 Recommendations for practice development in key partner organisations

4.2.1 Embed trauma-responsive, relational practice across services

The WISHED programme provides strong evidence that relational, Trauma-responsive approaches are central to engagement and outcomes, particularly for women not supported by traditional models.

Recommendation:

- Partner organisations (e.g. Change Grow Live, WWIN, Housing Options) should:
- Embed trauma-responsive and relational approaches within everyday practice.
- Shift from compliance-led interventions toward person-centred engagement.
- Create psychologically safe environments that support disclosure and trust.

4.2.2 Increase provision of women-specific and relational spaces

The evaluation highlights the importance of women-only, safe and supportive environments in enabling engagement and recovery.

Recommendation:

- Expand women-specific provision within existing services (e.g. women-only groups, support sessions, safe spaces).
- Integrate relational and peer-support elements into current service offers.

4.2.3 Strengthen holistic and coordinated approaches to support

WISHED demonstrates the effectiveness of addressing multiple needs simultaneously (trauma, addiction, housing, mental health), supported through coordinated and relational approaches across services.

Recommendation:

- Improve coordination between services to reduce fragmentation.
- Develop more integrated pathways between:
- Recovery services.
- Domestic abuse support.
- Housing provision.
- Ensure women are supported holistically, rather than through isolated interventions.

In the immediate term, emerging provision such as the Growing Hope programme at The Barn at Easington provides an opportunity to maintain connection and continuity within this coordinated approach. There is scope for partner agencies, particularly Change Grow Live, to support a small number of women to engage with this provision through practitioner involvement from around September 2026. This would enable continued relational support and recovery pathways for some women, while maintaining links between services and The Barn during a period when delivery of a further WISHED programme is not currently feasible.

4.2.4 Embed reflective practice and workforce development

The programme highlights the importance of ongoing reflection, learning and practitioner development.

Recommendation:

- Embed structured reflective practice across services.
- Provide training in:
 - Trauma-responsive care.
 - Stigma awareness.
 - Relational engagement approaches.
 - Support practitioner wellbeing when working with complex and high-need cohorts.

4.2.5 Value and embed lived experience

The WISHED model demonstrates the importance of lived experience in building trust and engagement.

Recommendation:

- Recognise lived experience as equal expertise within services.
- Increase opportunities for co-production in:
 - Service design.
 - Delivery.
 - Evaluation.
- Embed lived experience roles within organisational structures.

4.3 Recommendations for wider influence in cultural, structural and institutional change

4.3.1 Apply Equality Act 2010 Single Sex Exemptions where appropriate

The WISHED programme provides strong evidence of the importance of women-only spaces and gender-specific provision in enabling engagement, safety and recovery for women experiencing trauma, addiction, domestic abuse and related harms.

Recommendation:

- Commissioners should actively consider the appropriate use of Single Sex Exemptions under the Equality Act 2010 when designing and commissioning services for women with multiple and enduring unmet needs, including within:
 - Addiction treatment and recovery services.
 - Domestic abuse and violence against women and girls (VAWG) provision.
 - Housing and homelessness support services.
- Where clearly justified, services should be able to provide women-only environments as a proportionate means of achieving a legitimate aim, including:
 - Creating safety for women with experiences of trauma, violence or exploitation.
 - Supporting engagement for women who may not access mixed-sex provision.

- Enabling relational, trust-based and trauma-responsive practice.
- Commissioning frameworks should recognise that such provision:
 - Is legally permissible under the Equality Act 2010.
 - Is supported by evidence from the WISHED programme and wider research.
 - Represents good practice in meeting the needs of women experiencing multiple disadvantage.

4.3.2 Use WISHED as a model to inform commissioning and system design

The programme provides strong evidence for the effectiveness of:

- Trauma-responsive, relational approaches.
- Preventative, holistic interventions.
- Flexible and person-centred delivery models.

Recommendation:

- Use WISHED as a reference model for future commissioning, rather than seeking direct replication.
- Integrate its principles into service specifications across relevant sectors.

4.3.3 Shift commissioning from process-led to outcome- and relationship-led models

Partner findings highlight limitations of systems that prioritise compliance over care.

Recommendation:

- Commission services that:
 - Prioritise engagement, trust and outcomes, not just activity and throughput.
 - Allow flexibility to meet complex and non-linear needs.
 - Recognise relational work as a core element of delivery.

4.3.4 Invest in preventative, upstream interventions

The programme demonstrates that early, relational intervention can:

- Improve outcomes.
- Reduce demand on crisis services.

Recommendation:

- Increase investment in preventative models that:
 - Stabilise women earlier.
 - Reduce escalation into crisis systems.
 - Align commissioning with public health and prevention priorities.
 - Address systemic barriers and gaps in provision

Partner learning highlights that current systems remain:

- Fragmented.
- Rigid.

- Difficult to access for women with complex needs.

Recommendation:

- Develop integrated, women-specific provision across the system.
- Ensure services are accessible to women at different stages of recovery.
- Remove barriers that exclude women with non-linear engagement patterns.

4.3.5 Embed “compassionate professionalism” across organisations

The concept of compassionate professionalism emerged as a key system learning.

Recommendation:

Promote cultures that prioritise:

- Empathy and non-judgement.
- Authentic relationships.
- Respect for lived experience.
- Challenge hierarchical and risk-averse cultures that limit engagement.

4.3.6 Overall recommendation statement

The WISHED programme should be understood not only as a standalone intervention, but as a model for system change, providing clear evidence of how trauma-responsive, relational and holistic approaches can more effectively support women with multiple, enduring and overlapping unmet needs.

The immediate priority is to embed this learning across commissioning, policy and practice, supporting partner organisations to adopt more flexible, compassionate and integrated approaches. In the interim, emerging provision such as the Growing Hope programme at The Barn at Easington offers opportunities to maintain connection and continuity for a small number of women through ongoing partnership working, including practitioner involvement from services such as Change Grow Live.

At the same time, the WISHED programme provides a clear and evidence-based model for future delivery, with the proposed service specification ([Appendix 5](#)) and indicative budget ([Appendix 6](#)) setting out the level of resource required to deliver a full 12-month programme once delivery capacity allows.

5. Background to the WISHED programme

The WISHED programme was shaped and developed with and for women in recovery from trauma-based addiction. Previous work had identified that traumatic experiences, often beginning in childhood, had contributed to women’s journeys into addiction and, in many cases, to separation from their children. Without exception, these journeys included experiences of intimate partner violence, alongside wider challenges such as cultural stigma, family breakdown and exclusion from services that lacked the capacity and flexibility to respond holistically.

Recovery was understood to involve a complex and often intensified emotional process, as women experienced a renewed awareness of both painful and positive feelings.

Evidence from earlier programme evaluation and research demonstrated that regular, structured engagement with nature and creative activity could have a significant and positive impact on women's recovery journeys.

This understanding was reinforced by findings from previous work, including action research and evaluation of the Tina's Haven pilot project, which highlighted the importance of holistic, relational and emancipatory approaches to supporting women experiencing trauma, violence and addiction.⁹

Social learning and relational resilience are shown to be highly significant in addiction recovery, and “not solely an individual process” (Placek et. al., 2025).¹⁰ Women are shown to need access to safe, female only spaces to begin personal development and healing so they can move forward and build positive female relationships, and healthy, and fulfilling lives.¹¹

The evidence also suggested that women often felt vulnerable and unsafe within mixed-sex treatment and recovery environments, and that access to safe, women-specific spaces was essential. Social learning and relational resilience were identified as critical factors in recovery, emphasising that recovery is not solely an individual process, but one that is shaped through relationships, connection and shared experience.

In response, the WISHED programme was designed to provide a safe, compassionate and non-judgemental environment where women could begin to rebuild a sense of self, develop meaningful relationships, and engage in personal growth. By bringing together nature, creativity and relational support, the programme aimed to create the conditions necessary for healing, recovery and the development of more stable and fulfilling lives.

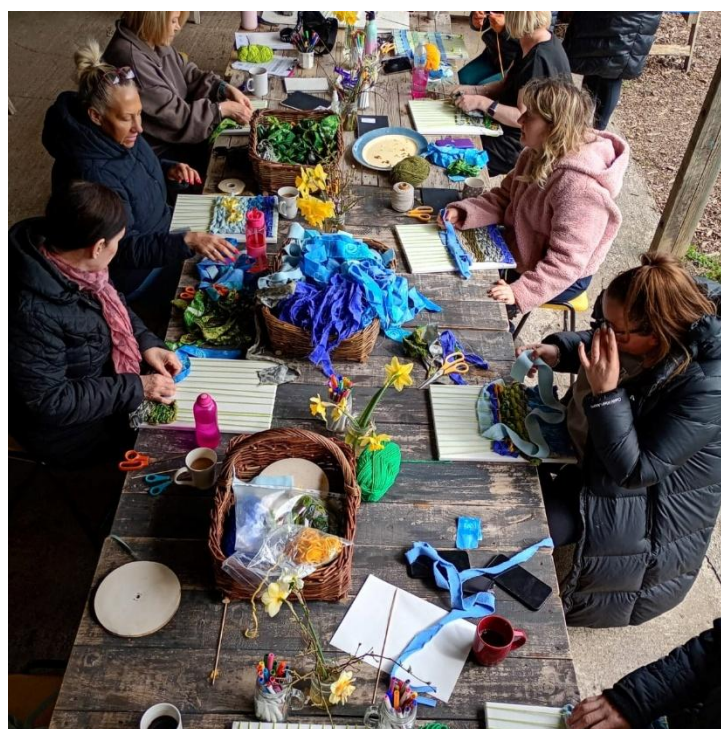


Figure 6: “A gentle spring day of creativity” – WISHED, 20th April 2026

6. Participation in the WISHED programme over twelve-months

n=20 women in total participated in three tranches of eight arts & nature-based sessions over the lifetime of the pilot WISHED Project.

- n=5 (25%) of women participated in Tranche 1 only.
- n=5 (25%) of women participated in Tranche 2 only.
- n=4 (20%) of women participated in Tranche 3 only.

Of the remaining n=6 (35%) of women:

- n=2 (10%) of women participated in Tranche 1 & 2.
- n=3 (14%) of women participated in Tranche 2&3.
- n=1 (5%) of women participated in all three Tranches.

The pattern of participant across all three Tranches of the WISHED arts & nature-based sessions over the lifetime of the pilot programme are illustrated in Table 1.

Table 1: Showing the pattern of participation across all three Tranches of the WISHED arts & nature-based sessions over a year (2025-2026)

Name	No. of sessions	12 th May	19 th May	2 nd June	9 th June	16 th June	23 rd June	30 th June	7 th July	20 th Oct	27 th Oct	3 rd Nov	10 th Nov	17 th Nov	24 th Nov	1 st Dec	8 th Dec	2 nd Mar	9 th Mar	16 th Mar	23 rd Mar	30 th Mar	13 th April	20 th April	27 th April
No. women	122	5	7	6	3	5	5	4	6	7	9	6	4	6	6	3	5	4	4	7	4	3	4	5	4
Evaluation	110 - (89%)	7	10	9	3	5	4	5		6	7	5	3	5	4	5		5	4	7	4	3	4	5	
BG	3 (38%)		X	X					x																
TA	4 (50%)	X		X			x		x																
ZF	4 (50%)		X	X		x	x																		
TM	5 (63%)	X	x			x		x	x																
RS	7 (87%)		X	X	x	x	x	x	x																
JK	1 (13%)															x									
RB	2 (25%)										x		x												
TO	4 (50%)											x	x	X	x										
YO	4 (50%)									X	x				x		x								
JB	6 (75%)									X	x	x		X	x		x								
DM	9 (56%)									X	x		x	X					X	X			X	X	X
CG	13 (81%)									x	X	X		X		x	x	X	X	X		X	X	X	X
VL	15 (94%)									X	x	x	x	X	x	x	x	X	X	X	X	X	X	X	X
AH	4 (25%)	X	X		x						x														
LL	11 (69%)	X	X	x		x	x	x	x	X	X	x			x										
HG	21 (88%)	X	X	X	x	x	x	x	x	X	x	x		X	x		x	X	X	X	X		X	X	X
SG	4(50%)																	X		X	X		X		
AH	1 (13%)																			X					
DP	2 (25%)																			X	X				
CW	2 (25%)																					X		X	

Four new participants joined the WISHED programme in Tranche 3. The average participation in the possible number of sessions for these n=4 women is significantly lower than that of the cohort of n=20 women as whole, 28% participation, compared to 51%. The pattern of participation of these n=4 women is illustrated in Table 2.

Table 2: Pattern of participation of n=4 new women who joined the WISHED programme in Tranche 3.

Initials	No. of sessions	2nd Mar	9th Mar	16th Mar	23rd Mar	30th Mar	13th April	20th April	27th April
No. new women		1	0	3	2	1	1	1	0
A	4(50%)	X		X	X		X		
B	1 (13%)			X					
C	2 (25%)			X	X				
D	2 (25%)					X		X	

Given this unusual trend, the evaluator questioned why these women were unable to sustain their participation. In response, the following information was provided by the practitioners about the barriers to participation for these women:

- A (n=4 sessions) was in admitted to hospital for treatment for long terms condition that has worsened from her being a “rough-sleeper.”
- B (n=1 session) - struggled with mobility issues, which was a barrier to her accessing nature.
- C (n=2 sessions) – struggled with an allergy which was a barrier to her accessing nature.
- In the relation to both B & C there was a sense of the women lacking motivation, which upon reflection required higher level of support and encouragement (this is reflected in the baseline scores for newcomers to the programme (see below).
- D (n=2 sessions) – the barrier for this woman was identified as the combination of her mental health and alcohol addiction, However, her participation although minimal, was perceived as a positive to her.
- Another participant from Tranche 2 (n=4 sessions), who had intended to participate in Tranche 3, stopped responding to say she was or wasn't attending, and later said she couldn't get to pick up point in time.

In relation to the n=4 new women that started in Tranche 3. The baseline WEMWBS scores were significantly lower for those women than in any other Tranche; particularly in relation to “being interested in new things,” “feeling close to other people,” “feeling loved” and “feeling optimistic about the future” see [section 8.1.3](#).

Putting together the practitioner perceptions and the quantitative data around participant engagement and mental health and well-being suggested. The practitioner focus group on 11 May 2026 examined the known and potential barriers faced by the n=4 participants who joined the programme in Tranche 3 and identified more could have been done more to support and maintain their engagement. This is reflected in the WISHED programme: Proposed revised service specification ([Appendix 5](#)).

7. Evaluation methods and data collection

7.1 Approach

The WISHED programme incorporates a reflexive, iterative and relational approach to evaluation, embedded throughout delivery and involving participants, practitioners and partner organisations. Evaluation methods were designed to capture both quantitative measures of change and qualitative insight into lived experience and practice, alongside wider system learning. The following methods were used:

- Regular engagement of a practitioner or link person from key partner organisations to accompany women and support continuity of engagement.
- Informal discussions between artists and practitioners immediately following sessions to reflect on delivery and participant experience.
- A collective journal capturing session plans, participant reflections and practitioner observations.
- A reflective online exercise with practitioners delivering Tranche 1 of the programme.
- Two facilitated practitioner focus groups (15 December 2025 and 11 May 2026) to reflect on learning, outcomes and practice development.

7.2 Methods to measure impact upon participants

To assess and measure impact for participants:

- Baseline and end-of-programme self-assessment based upon the Warwick–Edinburgh Mental Wellbeing Scales (WEMWBS).¹²
- Weekly participant reflection sheets completed at the end of each session.
- Facilitated focus groups with participants at the end of each Tranche (7 July and 8 December 2025, and 27 April 2026).

7.3 Methods to measure impact upon partner agencies and systems

To capture learning and implications for wider systems, the evaluation also included structured engagement with partner organisations:

- Facilitated half-day learning workshops following each Tranche (25 July 2025, 6 February 2026 and 23 June 2026), bringing together key partners to:
 - Interpret and analyse emerging findings.
 - Identify implications for practice, services, commissioning and policy.
 - Develop recommendations and future actions.
 - Evaluate the learning process itself at the end of each session.
- A short evaluative survey with key partner organisations at the end of the pilot programme, designed to assess how learning from WISHED had influenced:
 - Organisational thinking.
 - Professional practice.
 - Service delivery.
 - Commissioning approaches.

This survey complements the workshop data by providing structured reflection on wider organisational and system-level impact, strengthening the evidence base for findings presented in [Section 8.4](#).

8. Evaluation findings

The following section sets out the key findings from across the evaluation, bringing together quantitative and qualitative evidence to assess the impact of the WISHED programme. Drawing on data from participants, practitioners and partner organisations, the findings illustrate both the transformational outcomes for women and the programme's wider influence on practice, services and system learning.

8.1 Self- assessment of improvements in women's mental well-being

All WISHED programme participants were asked to complete baseline and end of programme scores from a self-assessment based upon The Warwick-Edinburgh Mental Wellbeing Scales (WEMWS), using the following scale:

- 0 = None of the time.
- 1 = Rarely.
- 2 = Some of the time.
- 3 = Often.
- 4 = All of the time.

The findings across each of the three Tranches and all three Tranches combined will now be discussed in turn.

8.1.1 Tranche 1 – baseline vs end of programme

Sample:

- Baseline: n=7 (88% response rate)
- End: n=7

Key findings Tranche 1

Clear upward shift toward “Often”. Across multiple statements, responses move from “Rarely / Some of the time” at baseline to “Often / All of the time” at end:

- **Optimism about the future:**
 - Baseline: mainly “Some of the time” (5/7).
 - End: “Often” (4/7) and “All of the time” (1/7).
- **Thinking clearly:**
 - Baseline: concentrated in “Rarely” (4/7).
 - End: largely “Often” (5/7) with “All of the time” present.
- **Feeling good about myself:**
 - Baseline: high “None” (2/7) and “Rarely” (2/7).
 - End: strong shift to “Often” (5/7).

Interpretation of key findings in Tranche 1

This Tranche shows a clear and consistent positive shift across cognitive (thinking clearly), emotional (self-worth), and future-oriented (optimism) wellbeing domains, with movement into higher-frequency wellbeing states.

8.1.2 Tranche 2 – baseline vs end of programme

Sample:

- Baseline: n=8 (100% response rate form those new to cohort).
- End: n=6 (60% response rate for n=10 participants in Tranche 2).

A reduced end-of-programme sample means findings describe the experience of those who completed the final assessment, not a matched cohort. This is significant limitation.

Key findings Tranche 2

Strong “Often / All of the time” profile at end. End-of-programme responses show high concentrations in the upper wellbeing categories:

- **Feeling close to other people:**
 - End: 5/6 “Often”
 - Baseline includes more spread across “Rarely” and “Some of the time”
- **Feeling loved:**
 - End: 3/6 “Often”, 2/6 “All of the time”
 - Baseline: broader distribution including lower categories
- **Feeling useful:**
 - End: 4/6 “Often”
 - Baseline: more “Rarely” responses (4/8)

Interpretation of key findings in Tranche 2

Despite a smaller end sample, Tranche 2 shows a clear concentration of responses in higher wellbeing categories, particularly in relational (connection, feeling loved) and purpose-based (feeling useful) domains.

8.1.3 Tranche 3 – baseline vs end of programme

Sample:

- Baseline: n=4 (100% response rate form those new to cohort).
- End: n=7 (88% response rate for n=8 participants in Tranche 3).

Key findings Tranche 3

In relation to the n=4 new women that started in Tranche 3. The baseline WEMWBS scores were significantly lower for those 4 women than in any other Tranche. Particularly in these categories:

- **Feeling loved** (‘some of the time’ to ‘none of the time’/ ‘rarely’).
- **Feeling optimistic about the future** (‘some of the time’ to ‘rarely’/ ‘none of the time’).
- **Feeling close to other people** (‘some of the time’ to ‘rarely’)
- **Been interested in new things** (‘some of the time’ to ‘rarely’)

Table 3 illustrates the baseline self-assessment of the n=4 new women in Tranche 3 in comparison with the combined baseline score for Tranches 1 and 2, across all of the categories that score lower.

Table 3: Showing the baseline self-assessment of the n=4 new women in Tranche 3 in comparison with the combined baseline score for Tranches 1 and 2

Mental Well-being Statement	Combined baseline (2&3)	Base-line (T3)	Difference
I've been interested in new things.	2.2	0.5	1.7
I've been feeling close to other people.	2.0	0.8	1.2
I've been feeling loved.	2.1	1	1.1
I've been feeling optimistic about the future.	2.1	1	1.1
I've been thinking clearly.	1.5	0.8	0.7
I've been able to make up my own mind about things.	1.6	1	0.6
I've been dealing with problems well.	1.5	1	0.5
I've been feeling interested in other people.	1.8	1.3	0.5
I've been feeling cheerful.	2.0	1.5	0.5

End-of-programme shows strong movement toward “Often” (supported by weighted scores). Weighted averages (on 0–4 scale) show high wellbeing:

- Interested in new things: 3.43.
- Interested in other people: 3.14.
- Optimistic about the future: 3.00 These values sit within the “Often” range, indicating frequent positive wellbeing experiences.

Interpretation of key findings Tranche 3:

Tranche 3 shows the strongest end-of-programme wellbeing profile, moving from a baseline that includes low-frequency wellbeing responses to an end profile where multiple domains are reported as “Often”. Key findings indicate significant improvement across several areas: participants reported feeling more interested in new things (weighted average 3.43), more interested in other people (3.14), and notably more optimistic about the future (3.00). These scores suggest frequent positive experiences and robust wellbeing at the programme's conclusion.

8.1.4 whole programme (all tranches combined)

Sample

- Baseline: n=19 (95% of cohort).
- End: n=20 (100% of cohort),

Table 4 illustrates the weighted averages for the well-being statements for all three Tranches combined.

Table 4: Weighted averages by well-being statement (All tranches combined)

WEMWBS statement	Baseline weighted avg (n=19)	End-of-programme weighted avg (n=20)
I've been feeling loved	1.95	3.20
I've been interested in new things	1.89	3.05
I've been feeling interested in other people	1.56	2.90
I've been feeling optimistic about the future	1.95	2.80
I've been feeling close to other people	1.79	2.75
I've been able to make up my own mind about things	1.56	2.75
I've been feeling cheerful	1.63	2.65
I've been thinking clearly	1.42	2.60
I've been dealing with problems well	1.44	2.55
I've been feeling useful	1.28	2.55
I've had energy to spare	1.42	2.50
I've been feeling good about myself	1.17	2.40
I've been feeling relaxed	1.26	2.35
I've been feeling confident	1.26	2.10

Key findings across all three Tranches:

Clear shift in overall distribution toward “Often”. Across the programme, there is a visible shift from mid-range wellbeing (“Some of the time”) to higher frequency wellbeing (“Often”):

- **Optimistic about the future:**
 - Baseline: majority “Some of the time” (10/19).
 - End: majority “Often” (12/20).
- **Feeling loved:**
 - End: 10/20 “Often” and 7/20 “All of the time”.
- **Feeling close to others**
 - End: 13/20 “Often”.
- **Interested in new things:**
 - End: 10/20 “Often” and 6/20 “All of the time”.

Reduction in “Rarely / None” responses. Across multiple statements, the proportion of low-frequency wellbeing responses reduces, particularly in:

- Confidence.
- Connection.
- Optimism.

8.1.5 Summary of findings from WISHED participant's self-assessment of well-being

Across the pooled programme, every statement increases from baseline to end-of-programme, with particularly large increases in:

- Feeling loved (1.95 → 3.20).
- Interested in new things (1.89 → 3.05).
- Interested in other people (1.56 → 2.90).
- Feeling good about myself (1.17 → 2.40).

Other findings across the WISHED programme are as follows:

a) Wellbeing improves across all Tranches:

- All three Tranches show movement toward higher-frequency wellbeing states ("Often / All of the time").
- This is most clearly evidenced in Tranche 1 (matched sample) and Tranche 3 (strong weighted averages).

b) The strongest improvements are in relational and emotional wellbeing:

Across Tranches, the most consistent end-of-programme strengths are:

- Feeling loved.
- Feeling close to others.
- Interest in others and new experiences.

These domains show some of the highest proportions of "Often / All of the time" responses at end of programme

c) Participants move from instability toward consistency of wellbeing

- Baseline profiles across all Tranches show: High proportions of "Rarely" and "Some of the time."
- End-of-programme profiles show: Concentration in "Often", with increasing "All of the time."

d) Overall conclusion:

The WISHED WEMWBS data shows a clear, consistent and meaningful positive shift in wellbeing, particularly in connection, confidence and emotional wellbeing, and in movement toward experiencing these states more frequently in everyday life.



Figure 7: “Connection, creativity and the calm of Spring” - forest bathing– WISHED, 9th March 2026

8.2 Findings from reflections and conversations with WISHED programme participants

In seven of each Tranche of 8 eight (88%) arts & nature-based sessions, participants were asked to complete a reflection sheet to record what they wanted “to say” about the session, what they would “take away,” what their “dreams” were, and what they wanted “to bin” (see the template in figure 8 following).

The overall evaluation response rate over twenty-four arts & nature-based sessions, was 90% (n=110 out of a possible n=122 responses), although this represents a 100% sample of the twenty-one sessions subject to individual evaluation.

[The WISHED Project Evaluation: Date: _____ Name (optional): _____]

What do you want to SAY about the session?

What are YOUR DREAMS from the session?

What will you TAKE AWAY from the session?

What do you want to BIN from the session?



the BARN at Easington

Sunderland City Council

Ten

Figure 8: WISHED weekly end of session evaluation

In the eighth and final session of each Tranche, a short focus-group was held with participants: 7th July, n=6 there were n=6 participants, on 8th December 2025 – n=5 participants, and 27th April 2026 – n=4 participants.

Individual reflections were first gathered from the women using large colour coded ‘post-it’ notes, using the following themes:

- What has been the BEST THING about this programme at The Barn at Easington?
- Has ANYTHING CHANGED for you as a result of this programme?
- Is there anything you think we SHOULD DO DIFFERENTLY next time?
- Anything else you want to say?

Individual reflections were then shared by the participants through a round-table conversation facilitated by the evaluator.

8.2.1 Participants’ reflections on the arts & nature-based sessions

Across combined weekly reflections (and reinforced in focus groups), participants used consistent language of enjoyment and high value; this is evident and consistent in feedback from all three Tranches of arts and nature-based sessions:

- In Tranche 1 weekly reflections, feedback included: “Absolutely, bloody fantastic,” “Loved every minute of it,” and “I have loved every second. Very therapeutic.”
- In Tranche 2 weekly reflections, participants described the sessions as: “Exceptional, creative, therapeutic, calm. soulful,” “Thoughtful, relaxing, fun, creative,” and “Magical. Loved everyone’s company.”

- Tranche 2: “I loved it and everyone was welcoming,” and “Loved meeting new people and reconnecting with others.”
- Tranche 3: “So happy to be back with the best ladies. Feeling loved, chilled and happy,” and “Amazing... feeling safe, secure and having a laugh.”

This is reinforced strongly in the Tranche 3 focus group, where participants described: “No judgement, just feeling part of something unique and beautiful,” and “A safe space and a safe haven.” Participants’ comments show the sessions meet people “where they are” — including vulnerability and difficult days.

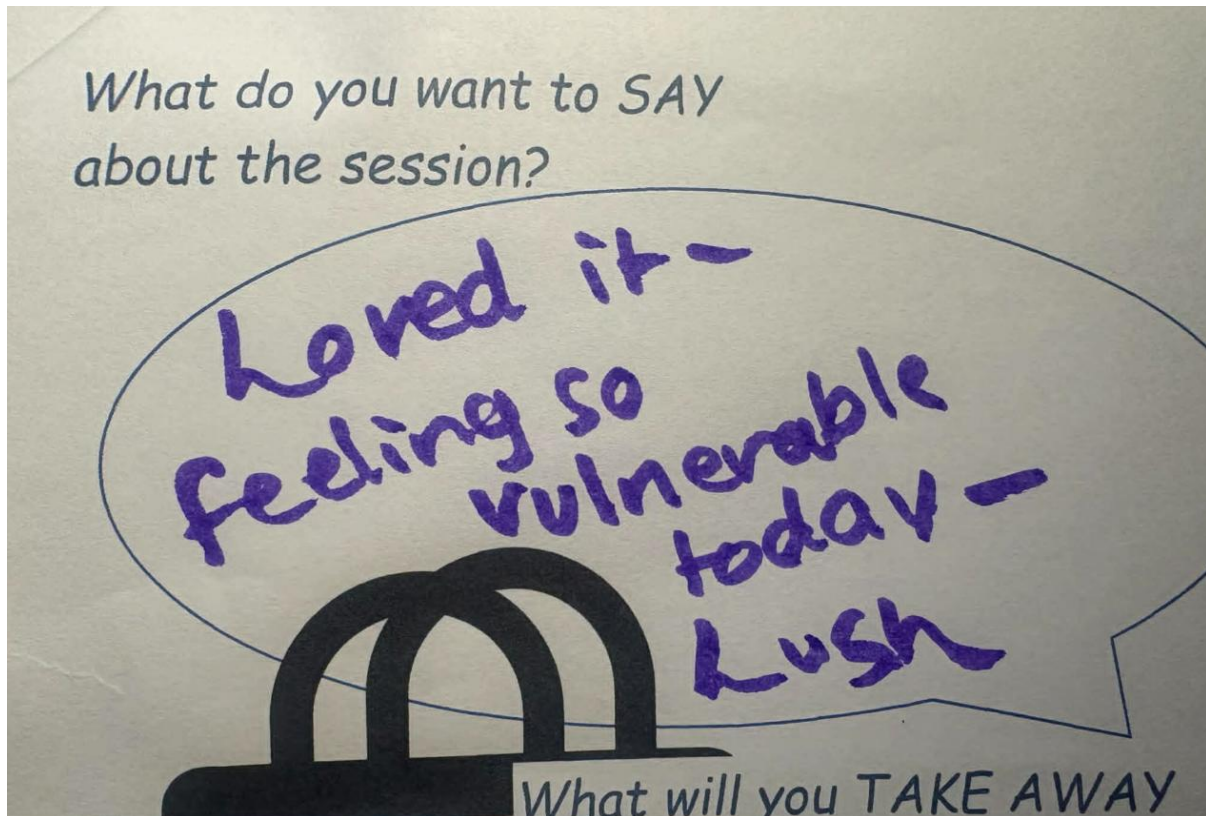


Figure 10: Participant weekly feedback and reflection (Tranche 3)

Tranche 3 weekly reflections explicitly capture participants attending while struggling and experiencing the space as a support: “Today I was struggling, I needed The Barn,” and “Nervous at first but was soon put at ease.” Participants also explicitly framed openness and vulnerability as part of the experience: “Being vulnerable is okay...” and “Loved it, feeling vulnerable today – lush.” This aligns with Tranche 2 focus-group testimony on vulnerability and opening up:

“I can be vulnerable. I feel a part of something,” and “It’s so uplifting for me but also scary... I truly opened up.”

8.2.2 Participants’ reflections and takeaways

A repeated “take away” is calm, peace, and emotional regulation, in the participants narratives, these are often contrasted with how they felt before:

- Tranche 1 “take away” responses include “Peace and confidence,” “Clear head,” and “Not to feel anxious.”
- Tranche 2 “take away” responses repeatedly centre peace/calm and emotional lift: “Feel calm and relaxed,” “Calm. Didn’t feel it before the session,” and “Happiness, calmness, confidence.”
- Tranche 3 weekly “take away” responses continue this strongly: “Peace, happiness, positivity,” “Peace, relaxation, friendship, reflection,” “Calm, peace, happy thoughts,” and “Peace, calmness, relaxation and joy.”

Participants also explicitly name reducing stress and worry in what they want to “bin”: “My worries and stress,” “My over-thinking,” and “Negativity I came with.”

As illustrated in the word-cloud in Figure 11, in relation to “What will you take away the arts & nature-based sessions?”, “Peace”, “love” and “happiness” are overriding themes.

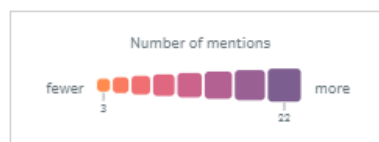


Figure 11: Word cloud illustrating n=110 combined narrative responses to - “What will you TAKE AWAY from the arts & nature-based sessions?”

In narrative feedback from all three Tranches, participants describe growth in confidence, self-worth and self-acceptance:

- Tranche 1 focus group: “I have been able to open up and start to move forward with my life and I am starting to like myself,” and “I feel more open and more confident.”
- Tranche 2 weekly “take away” includes explicit self-belief content: “Friendship, new beginnings and believing in myself,” and learning: “Learning to love yourself.”
- Tranche 3 weekly “take away” includes: “Self-worth and love,” “Be me,” and “Change is possible.”

The Tranche 3 focus group contains the strongest “difference made” statements:

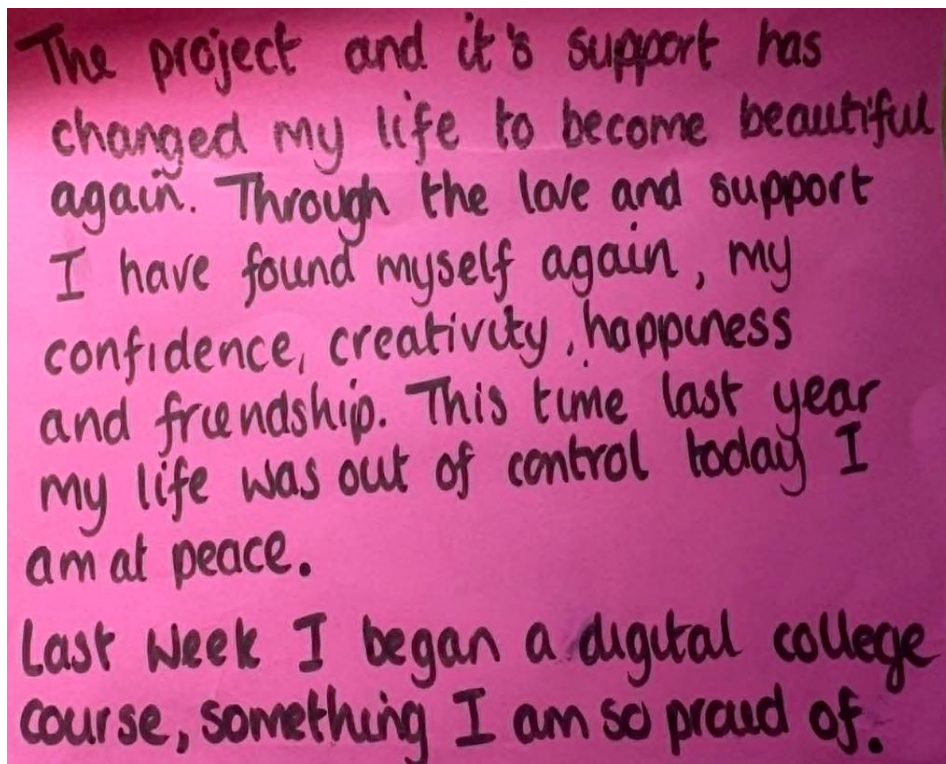
“This project has given me back my self-confidence and self-belief; I feel empowered to try anything. WE CAN DO IT!,” and “It has made a difference to my – confidence, motivation, self-worth.”

Feeling connected and less alone is presented as a key mechanism of change:

- Tranche 1 focus group: “Linking, we wouldn’t have come together otherwise. We didn’t know each other,” and “You think that you are the only one, and then you realise that there are others in the same boat.”
- Tranche 2 weekly responses similarly reflect connection and belonging: “Brilliant atmosphere... Connected,” and “Absolutely fantastic! Beautiful people.”
- Tranche 3 weekly responses directly describe “company” and friendship as a take-away: “Thankfulness and friends,” “Love and companionship,” and “Peace, relaxation, friendship, reflection.”

The Tranche 3 focus group reinforces that it is the relationship quality—“love, support and friendship”—that participants value: “No judgement... feeling part of something unique and beautiful.” In Tranche 3 in particular; participants describe life-changing or life-saving impacts, and concrete steps forward. Tranche 3 focus group provides direct, concrete impacts:

“I have reconnected with my family and been invited to a family event for the first time in years,” and “Last week I began a digital college course... I was nervous and anxious... but I still did it.”



The project and it's support has changed my life to become beautiful again. Through the love and support I have found myself again, my confidence, creativity, happiness and friendship. This time last year my life was out of control today I am at peace.

Last Week I began a digital college course, something I am so proud of.

Figure 12: Participant focus group, Tranche 3 (27th April 2026)

It also includes profound statements of impact:

“This time last year my life was out of control, today I am at peace,” and *“The WISHED project has literally saved my life.”*



Figure 13; Participants focus group Tranche 3 (27th April 2026)

Tranche 3 weekly reflections also add recovery-specific “difference” content in the dreams/ambitions and intentions responses (see next section), which indicates participants are explicitly linking the sessions to sustained change efforts:

“To continue to get sober,” “Just to get sober,” and *“To keep coming and get sober again after a relapse and a couple of hard times.”*

8.2.3 Participants’ dreams and aspirations

Combined feedback on the nature-based sessions focused on aspirations for greater peace, reduced stress, and increased self-worth. Many participants expressed hopes for positive mindsets, stronger relationships, creative expression, and mindful living. Desires were highlighted for deeper community and nature connections, as well as ongoing learning. As illustrated in the word cloud in Figure 14, from “What are your dreams from the arts & nature-based sessions”, an overarching theme is for the WISHED programme to continue, and for the women to keep learning.

Overall, the feedback reflects a collective wish for personal growth, well-being, and supportive connections, with most participants expressing optimism and appreciation for the session's impact on their dreams and ambitions and intentions moving forward.

- Tranche 1 dreams include: "More happiness, less sadness," "Being happy," and "To continue feeling content and happy as I am when I am here."
- Tranche 2 dreams (weekly) emphasise peace and self-love: "Inner peace and self-love," "To be hopeful and positive," and "To learn to self-love and heal."
- Tranche 3 dreams continue this but make the "carry it forward" intention very explicit: "To carry the positivity I feel into the rest of the week," "To carry the peace and calm home," and "To be calm and grounded for the rest of the week."

The ambitions and intentions identified by the women themselves through the weekly feedback and reflections sheets, and the focus groups are as follows)

- a) Connection and belonging ambitions and intentions: keep coming, keep seeing the women, keep learning together.
- b) Self-worth, self-care, and personal agency ambitions and intentions.
- c) Creativity and nature connection as forward-looking aspirations.
- d) Recovery and rebuilding ambitions and intentions become much more explicit in Tranche 3 weekly reflections.

These ambitions and intentions are now outlined and expanded in turn:

a) *Connection and belonging ambitions and intentions: keep coming, keep seeing the women, keep learning together*

- Tranche 1 dreams include: "To continue building relationships," "To keep connected," and "Meet new friends."
- Tranche 2 dreams include: "For these sessions to continue for these women in a safe space doing healing activities together," and "To keep communicating and connecting <3."
- Tranche 3 dreams are especially direct about attendance and connection:

"To keep coming, keep seeing the lovely ladies," and "To keep coming - love this place."

b) *Self-worth, self-care, and personal agency ambitions and intentions*

- Tranche 1 dreams contain self-care and self-belief: "Self-care," "To be kind to myself," and "To become more confident."
- Tranche 2 dreams include: "Self-care, reminded myself that I am worth it," and "Staying focussed. Positive self-love and self-care."
- Tranche 3 dreams again deepen this into agency and boundaries: "To stand my ground," "To let go of the past and live for today," and "Reconnect with myself and concentrate on the positives." And Tranche 3 weekly reflections include a very explicit self-worth statement as an ongoing intention:

"...getting a positive mindset and realising, I am enough."

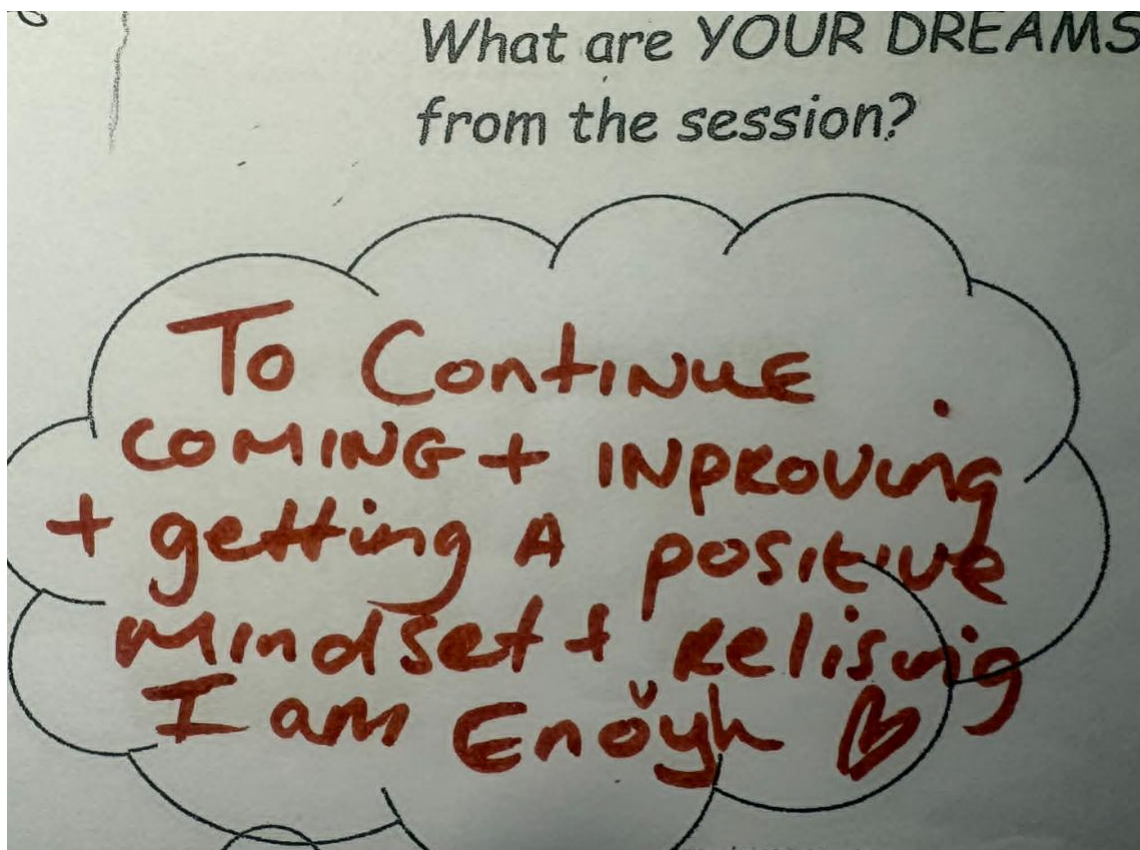


Figure 16: Participant weekly feedback and reflection (Tranche 3)

c) **Creativity and nature connection as forward-looking aspirations**

- Tranche 1 dreams include: “Learning to make new things,” and “To be brilliant at willow baskets.”
- Tranche 2 dreams include: “Develop my creativity. Inspiration,” and “To be more creative and believe in my achievements.”
- Tranche 3 dreams maintain this strand:

“Plant and create more beauty with nature,” and “Carrying on my adventures and enjoying being creative.”

d) **Recovery and rebuilding ambitions and intentions**

A key difference in the Tranche 3 weekly dataset is how clearly participants articulate sobriety and recovery aims as “dreams” from sessions: “To continue to get sober,” “To get sober,” “I just want to keep fighting to become sober,” and “Just to get sober.” Importantly, the data includes relapse-aware recovery ambitions and intentions:

“To keep coming and get sober again after a relapse and a couple of hard times. Love this place.”

This aligns with the Tranche 3 focus group statement of moving forward:

“Just look at me now, I am ready to see the other side.”



Figure 17: “Nature, Creativity & Big Calm Energy” – WISHED, 9th March 2026

8.2.4 Participant reflections: Elements to "Bin" from the Session

Combined feedback on the nature-based sessions focused on what participants wanted to "bin" from the session were mixed. Some WISHED to let go of repetitive negative thoughts, emotional burdens, and anxiety, while a few mentioned physical discomfort or group participation concerns. However, a significant number simply stated they had nothing to discard, often expressing satisfaction with the session.

Overall, feedback reflects a balance between those seeking relief from negativity and those who felt content, with no clear consensus on a single theme to address further.

What participants said should be different: almost always “longer” (time and/or weeks), rather than changing the content:

- In Tranche 1 focus group: “Longer sessions.”

- In Tranche 3 focus group: “Longer sessions... sometimes it is rushed,” “Reflecting on the day, sometimes it is rushed because the bus is here,” and “More weeks (12 weeks), and longer sessions (all day).”
- Even in Tranche 3 weekly “bin” responses, the dominant message is not to remove anything:

“Not one thing,” “NOTHING! I love every minute, thank you,”

“Nothing - I would like to stay longer.”

8.3.3 WISHED participants’ key messages for commissioners

From analysis of the combined data from participants in all three Tranches of the pilot WISHED programme, the emerging key messages for commissioners are as follows:

- a) Fund it, keep it going, and expand it: participants describe WISHED as a *“lifeline”*, *“life saver”*, and *“best therapy.”*
- b) The programme’s value is rooted in safety, non-judgement, and the ability to speak freely.
- c) Don’t change the core offer; increase dose and time (longer sessions, more weeks).
- d) WISHED supports recovery trajectories, including relapse-aware re-engagement.

These key messages are now outlined and expanded in turn: Fund it, keep it going, and expand it: participants describe WISHED as a *“lifeline”*, *“life saver”*, and *“best therapy”*

Tranche 3 focus group is unequivocal in its message to commissioners:

“Please can we have more funding for this project, it has been a lifeline,” “This place is a life saver for many women,” and “This is the best therapy – love, nature and belonging.”

Participants also frame the model as broadly transferable:

“If it can help me, it can help anyone. Keep it happening.”

Weekly reflections add ‘real-time’ evidence that women rely on WISHED sessions when they are struggling:

“Today I was struggling, I needed The Barn.”

- a) The programme’s value is rooted in safety, non-judgement, and the ability to speak freely

Tranche 2 weekly responses include:

“I loved the peace and safety, being able to be me.”

Tranche 3 weekly reflections make the commissioning implication explicit:

“How important is it for people to have a space where they can speak freely without judgement.”

Tranche 3 focus group supports this “safe haven” message:

“A safe space and a safe haven.”

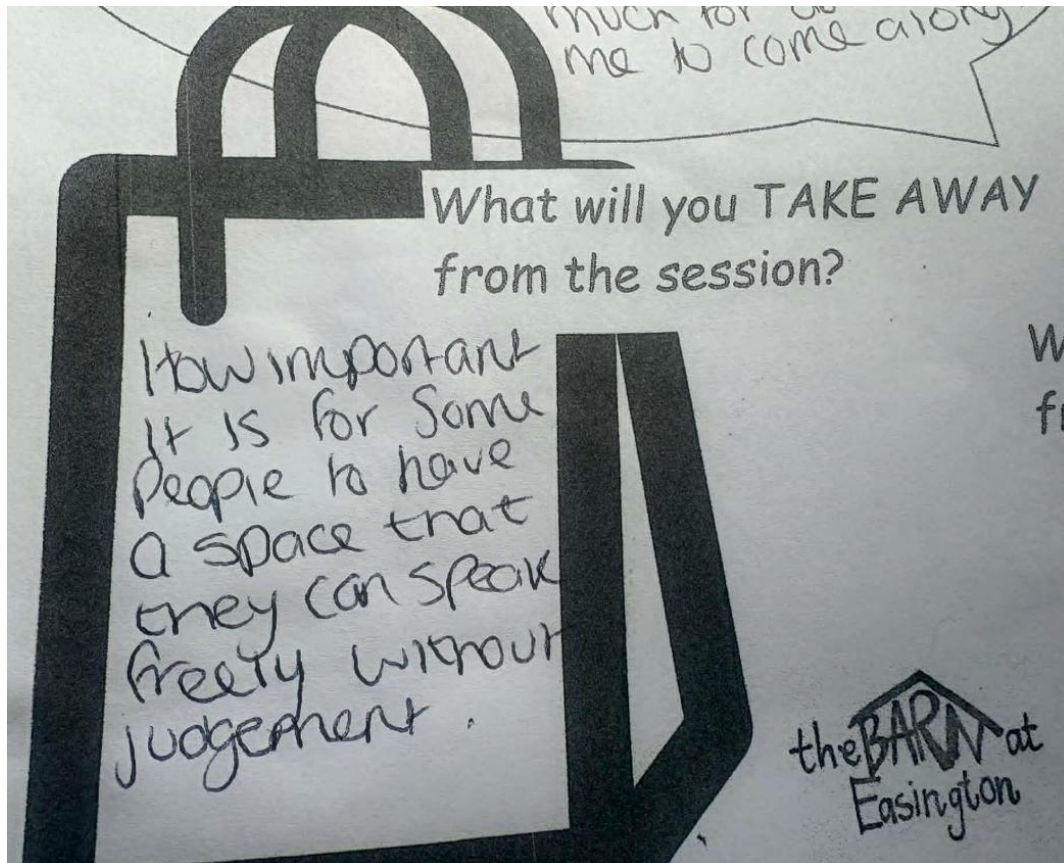


Figure 18: Participant weekly feedback and reflection (Tranche 3)

- b) Don't change the core offer — increase dose and time (longer sessions, more weeks)

Across Tranches, the recurring request is not redesign but “more”.

- Tranche 1 focus group: “Longer sessions.”
Tranche 3 focus group: “More weeks (12 weeks), and longer sessions (all day),” with practical detail that “Reflecting... is rushed because the bus is here.”
- Tranche 3 weekly “bin” responses show the same: “Not one thing at all,” and “Nothing - I would like to stay longer.”

Taken together, the data supports a clear commissioning message: preserve what works, and resource more time for it.

- c) **WISHED supports recovery trajectories, including relapse-aware re-engagement**
- Tranche 3 weekly “dreams” make recovery aims explicit and repeated: “To get sober,” “To continue to get sober,” and “...get sober again after a relapse and a couple of hard times.”
 - Tranche 3 focus group complements this with the language of life stabilisation and moving forward: “This time last year my life was out of control, today I am at peace.”

This is powerful commissioning evidence that the programme contributes to persistence and re-engagement rather than “all-or-nothing” participation.

8.3 Findings from reflections and conversations with WISHED programme artists and practitioners

A reflective focus-group with practitioners delivering the WISHED arts & nature-based sessions was held at the end of Tranche 2 (15th December 2025), and Tranche 3 (11th May 2026). In Tranche 1, practitioners narrative responses were gathered through a qualitative online survey. In Tranche 1, participants narrative responses were also gathered during a focus group with the participants (27th April 2026). The focus-groups took place at The Barn at Easington, facilitated by the evaluator. For participation see [Appendix 1](#)).

The format followed the focus group with the programme participants: individual reflections were first gathered from the women using large colour-coded, themed ‘post-it’ notes:

- a) What have been the HIGHLIGHTS of WISHED
- b) What have you LEARNED a result of WISHED
- c) Is there anything you think we SHOULD DO DIFFERENTLY moving forwards?
- d) What are your key messages for commissioners?

A further practitioners focus group, took place on 11th May 2026. Practitioners drew upon learning from the 2025-2026 pilot programme to design a proposed service specification for a future WISHED programme (see [appendix 6](#)).

8.3.1 Highlights from the WISHED programme from practitioners

- a) **A highly relational, supportive and “together” model of practice**

Across all three Tranches, practitioners consistently describe WISHED as grounded in connection, togetherness, and mutual support. In Tranche 3, this is explicitly articulated as “togetherness, supportiveness... love and encouragement”, while Tranche 2 reflections highlight the strength of collective working, including:

“utilising our individual strengths to create a powerful effective support for women to grow and blossom”.

Practitioners across **Tranche 1 and Tranche 2** also described the work as a shared and meaningful process, reflecting that the programme enabled them to “feel a part of something” and engage in a collective journey of support and growth. This demonstrates

that the relational foundation of the programme was consistently recognised across all phases of delivery.

b) *Creation of a safe, non-judgemental and trusting space*

A defining highlight across Tranche 1, Tranche 2 and Tranche 3 is the intentional creation of a safe, non-judgemental environment. Practitioners in Tranche 1 emphasised:

“Allowing the women a voice and safe space just to be”

While Tranche 2 reflections highlight that:

“There was a warm feeling of trust from the very beginning”.

By Tranche 3, practitioners strongly reinforced this as a core strength of the model, stating that:

“The women feel safe to speak with no judgement”.

The consistency of this theme across all Tranches demonstrates that psychological safety is a central and sustained feature of WISHED delivery.

c) *Watching women grow in confidence, connection and self-expression*

Practitioners across all Tranches identified **observing change in women** as one of the most powerful aspects of the programme. In **Tranche 1**, they reflected on

“Watching each woman’s confidence grow” and “Seeing women step out of their comfort zone”.

This continued into Tranche 2, where practitioners observed women “feeling relaxed and at ease over time... growing in confidence each week” and “coming together and connecting”. By Tranche 3, this development was described in relational terms, with:

“The women coming together and feeling a part of something”.

Together, these reflections show a clear trajectory of growing confidence, connection and belonging across the life of the programme.

d) *The role of nature, creativity and meditation as core to the model*

Across all Tranches, practitioners consistently describe the nature-based and creative elements as central to outcomes. In Tranche 1, practitioners highlighted:

“Being with nature and watching the women grow”.

This understanding deepened through Tranche 2, where nature and meditation were recognised as contributing to relaxation and emotional openness. By Tranche 3, practitioners explicitly articulated this as a mechanism of change, noting:

“The power that being in nature had to slow down our minds” and “watching the women connect with nature and become themselves”.

This consistency across Tranches demonstrates that nature and creativity are core components of the WISHED model, directly enabling engagement and healing.

e) **Shared learning and growth among practitioners**

Practitioners also consistently identified their own development as a key highlight. In Tranche 1, practitioners noted that:

“ The experience changed my learning... women spaces are sacred to healing”.

This continued in Tranche 2, where practitioners described learning to “free-style” and use authenticity to build connection. By Tranche 3, this had evolved into collective growth, with practitioners stating that:

“Working together has helped us grow as a team”.

This demonstrates that WISHED is not only impactful for participants but also strengthens practitioner capability and reflective practice over time.



Figure 19: Making brooms as part of International Women's Day Celebrations – WISHED, 9th March 2026

8.3.2 What difference the WISHED programme had made

a) Increased confidence, self-worth and emotional expression among women

Across **Tranche 1 to Tranche 3**, practitioners consistently report increased confidence and self-worth among participants. In **Tranche 1**, they observed “confidence grow” and women gaining a voice.

In **Tranche 2**, this was described as women “growing in confidence each week” within a trusting environment. By **Tranche 3**, practitioners reported:

“We have witnessed massive growth; the women have developed the ability to see their own worth”.

This indicates a sustained and cumulative impact on self-perception and emotional development.

b) Development of strong peer relationships and community

A key difference consistently identified across all Tranches is the development of peer relationships and community. In Tranche 1, practitioners observed women becoming more open and connected to others.

In Tranche 2, this became more embedded, with women “supporting and encouraging each other” and forming authentic connections. By Tranche 3, this was described as:

“Women coming as strangers and leaving becoming sisters”.

This demonstrates that social connection is both a key outcome and a mechanism of change within the programme.

c) Improved emotional regulation, calmness and wellbeing

Practitioners across all Tranches observed improvements in emotional regulation and wellbeing. In Tranche 1, women were seen to relax and become more open.

In Tranche 2, this developed further, with practitioners noting that women increasingly felt “safe” and at ease within the environment. By Tranche 3, practitioners could clearly observe the emotional shift within sessions:

“How calm the women are, from arriving... to the end of the session”.

This demonstrates the programme’s impact on mental wellbeing and emotional stability.

d) Sustained engagement, even in challenging circumstances

Practitioners highlighted that women continued to attend sessions even when facing difficulties. In Tranche 3, this was described as:

“Women coming each week, even when things have been difficult”.

This reinforces observations from earlier Tranches that the environment created at WISHED is sufficiently supportive to maintain engagement among women with multiple, enduring and overlapping unmet and fluctuating needs.

e) **Evidence of holistic change across participants and the programme as a whole**

Practitioners described the impact as wide-ranging and multi-dimensional. In Tranche 3, they summarised this:

“A lot of change in every aspect of the project”.

This builds upon earlier observations in Tranche 2, where practitioners noted growth in confidence, relationships, and emotional openness simultaneously. Taken together, this provides compelling evidence of holistic and sustained impact across Tranches.

8.3.3 What could be done differently if there are future WISHED programmes

a) **Longer sessions and more time for activities**

Across all three Tranches, the most consistent recommendation is the need for increased time. In Tranche 2, practitioners suggested:

“Offering “more sessions and making them permanent”.

By Tranche 3, this is expressed more explicitly, with practitioners stating:

“Three hours is not enough; we have to rush sometimes. We longer sessions... more time in the woods, meditating, making and eating”.

This indicates that the current model is effective but constrained by time limits.

b) **Increased continuity and sustainability of provision**

Practitioners in Tranche 1 emphasised the importance of continuity, stating:

“Just to keep the work going”.

This is reinforced in Tranche 2, where practitioners suggested making sessions ongoing or permanent. The persistence of this recommendation across Tranches demonstrates the importance of long-term provision for sustained impact.

c) **Enhanced practitioner support and integration of specialist interventions**

Practitioners identified the complexity of working with women experiencing trauma and addiction. In Tranche 1, some practitioners noted feeling “out of their depths” and identified a need for trauma-responsive training. However, as time went on, there is a sense that practitioner learned and gain skills, knowledge and confidence from

Practitioners also suggested integrating additional support approaches, such as structured domestic abuse interventions, to enhance the offer. This reflects an evolving understanding of how to build on the core model.

e) **Strengthening systems and infrastructure around delivery**

Across Tranche 1 and Tranche 2, practitioners identified practical considerations, including:

- Reviewing “transport” arrangements (Tranche 1)
- Introducing boundaries for communication channels such as WhatsApp (Tranche 2)

They also highlighted the importance of knowledge sharing and collaboration across services (Tranche 2).

f) **Need for wider systemic change beyond the programme**

Practitioners in Tranche 2 expressed frustration with broader service systems, noting that people’s lives were often reduced to “money and numbers”.

This suggests that WISHED not only delivers impact but also highlights limitations within wider systems and commissioning approaches.

8.3.4 Key messages about the WISHED programme from practitioners to commissioners

Across Tranche 1, Tranche 2 and Tranche 3, practitioner evidence consistently demonstrates that WISHED:

- Creates safe, trusting and non-judgemental environments.
- Enables confidence, connection and emotional development.
- Supports recovery through nature, creativity and relationships.
- Builds collaborative, reflective and compassionate practice.

The core message for commissioners is clear and consistent across all Tranches: retain the model, invest in longer and more sustained provision, and recognise WISHED as a powerful example of effective, compassionate, trauma-responsive practice.

a) **Women-only safe spaces are essential**

Across all Tranches, practitioners clearly emphasise the importance of sex-specific safe spaces:

“Women’s safe spaces really matter” (Tranche 3)

“Safe space... just to be” (Tranche 1)

This is presented as a critical condition for engagement and healing.

b) The WISHED model is effective and should be sustained and expanded

Practitioners consistently highlight the importance of continuing the work. In Tranche 3, they state clearly:

“Work like this is essential to enable women to grow and heal.”

This builds on earlier learning across Tranche 1 and 2, reinforcing that the model is both valuable and necessary.

c) Nature-based and relational approaches are key to impact

Practitioners emphasise that the outcomes are directly linked to the model itself. In Tranche 3, they state:

“Nature is where the healing is found”

“Gentle relationships... through nature, creativity, meditation”

This confirms that the approach is not interchangeable, but integral to achieving outcomes.

d) More time and sustained investment are required

Across Tranche 2 and 3, practitioners consistently recommend increased investment in time and continuity:

- Longer sessions.
- More sessions.
- Ongoing delivery.

This is the most consistent recommendation across all datasets.

e) The programme demonstrates a model of compassionate, relational practice that could inform wider systems

Practitioners in Tranche 2 clearly articulate a contrast between traditional and WISHED approaches:

Traditional professionalism:

“cold-hearted... unapproachable... risk-averse.”

WISHED approach:

“Compassion, kindness... trust and authenticity.”

This highlights the potential for WISHED to inform broader service design and cultural change within systems.



Figure 20: Walking the Labyrinth.” – WISHED, 27th April 2026

8.4 Findings from conversations and reflections involving key partners of WISHED

The programme evaluator facilitated a sharing and learning workshop with key WISHED partners at The Barn at Easington after the of Tranche 1 on 26th June 2025; and after Tranche 2 on 6th February 2026.

The following agencies were represented by participants in the learning workshops:

- WWIN Domestic Abuse Service.
- The Barn at Easington.
- Wear Recovery (Change, Grow, Live.
- Public Health, City Council. (Domestic Abuse & VAWG) x 3
- Sunderland Housing Options Team.

A short evaluative survey was completed by key partners involved in, or influenced by, the WISHED programme. Five responses were received, representing partner organisations across the system, including:

- City of Sunderland Council
 - Public Health.
 - Sunderland Housing Options Team.
- WWIN Domestic Abuse Services.
- Change Grow Live (Wear Recovery).

The purpose of the survey was to identify whether, and in what ways, learning from the WISHED programme had influenced organisational thinking, practice, service delivery, commissioning, and wider approaches to supporting women experiencing trauma, addiction, domestic abuse, and insecure housing.

8.4.1 Key issues raised by the WISHED programme partners from the two learning workshops

Across both workshops, partners consistently identified systemic and structural barriers within current services and commissioning as a major limitation in effectively supporting women with multiple, enduring and overlapping unmet needs. Systems were described as rigid, process-driven and often prioritising assessment, compliance and procedural requirements over lived experience and relational engagement. Partners highlighted practices such as: *“one fail and you are out”* which exclude women with non-linear recovery journeys and reinforce disengagement.

By February 2026, this critique had deepened, with systems characterised as *“frustrating... oppressive and confusing”*, underpinned by hierarchical, top-down models of professionalism and commissioning. Constraints within policy, safeguarding frameworks and funding structures were seen to limit flexibility and innovation, contributing to gatekeeping, stigma and exclusion, particularly where addiction is foregrounded over trauma.

Alongside this, partners identified significant gaps in provision and a need for fundamental shifts in both practice and culture. Existing services were described as *fragmented and insufficiently responsive to women experiencing complex intersections of trauma, addiction, domestic abuse and housing instability*. In response, there was strong consensus on the need to move towards relational, trauma-responsive and holistic models of support, grounded in compassion, trust and meeting women “where they are”. Central to this was the concept of “compassionate professionalism”, emphasising empathy, authentic relationships and recognition of lived experience as equal expertise.

Partners also highlighted *the importance of embedding co-production, strengthening cross-agency collaboration, and investing in workforce development to support more reflective, relational practice*. Overall, there was a clear call for sustained and systemic change, with the WISHED programme identified as an effective model that demonstrates what works and offers a foundation for wider transformation across policy, commissioning and service delivery.

8.4.2 Findings from partners survey to identify learning from the WISHED programme

The partner learning survey demonstrates that the WISHED programme is having meaningful influence beyond participant outcomes, acting as a catalyst for wider reflection, practice development and cross-system learning. The strongest impacts are visible in:

- Strengthened thinking about risk and support for women with substance misuse and trauma.
- Increased use of Trauma-responsive, gender-responsive and person-centred approaches.
- Positive influence on discussions about service delivery and future commissioning.
- Wider organisational learning, collaboration, and innovation, including the development of new women's support initiatives.

While evidence of formal policy change is more limited at this stage, the survey strongly suggests that WISHED is already contributing to cultural and practice change across partner agencies, increasing awareness of the importance of compassion, flexibility, Trauma-responsive practice and lived experience in developing more effective services for women with multiple, enduring and overlapping unmet needs.

Taken together, these findings indicate that WISHED is not only an effective programme for women, but also a system-learning intervention, helping to reshape how organisations understand, commission and deliver support for women facing complex disadvantage.

The survey findings are now discussed in detail:

a) Influence on discussions about risk and support

The survey indicates that the WISHED programme has prompted and strengthened conversations across partner organisations about both risk assessment and how women with substance misuse issues are supported. One respondent stated simply that the programme had been:

“The topic of various conversations throughout the directorate,”

...suggesting a broadening of internal dialogue beyond frontline delivery.

Another response describes how:

“WISHED has helped to strengthen conversations across our directorate around the specific needs of women experiencing drug and alcohol related harms alongside trauma, domestic abuse, poor mental health, and insecure housing.”

A notable feature of the responses is the recognition that traditional approaches to risk assessment may be insufficient when working with women experiencing multiple and overlapping disadvantage. One respondent explained that the programme has supported:

“Greater recognition that traditional approaches to risk assessment can unintentionally overlook the complexity of women’s lived experiences,”

...especially where coercion, exploitation, safeguarding concerns, and barriers to engagement are present. The same response highlighted increased discussions about adopting:

“More trauma-informed and gender-responsive approaches”

...to risk assessment and ongoing support, including the need to recognise hidden risk, reduce stigma, and improve psychological safety.

Another partner noted that discussions about risk were not entirely new, but that there had been:

“More focus on those attending WISHED within case management looking at risk.”

Taken together, these responses suggest that WISHED has not created an entirely new awareness of risk but has significantly deepened and sharpened how risk is understood, particularly by encouraging a more contextual, Trauma-responsive and relational lens.

b) Influence on how organisations support women

The survey responses show that the WISHED programme has had a clear influence on organisational thinking about how women are supported, particularly women experiencing trauma, addiction, domestic abuse and insecure housing. While not all respondents reported direct changes to formal risk assessment processes, there is strong evidence that practice has become more person-centred, Trauma-responsive and gender-responsive as a result of the programme. One respondent reported that learning from WISHED had already contributed to service development, stating:

“We have developed support for women with substance misuse issues in the City building on learning from WISHED and we have applied for a grant to upscale this work along with a Housing First intensive support model.”

This demonstrates that the programme has influenced not only practice but also future service planning and resource development. Other responses showed more specific practice changes. One partner stated that, although WISHED had not significantly changed formal approaches to risk assessment beyond the specific risk assessments for The Barn itself, it had influenced support practice because:

“Since this began Wear Recovery has increased the level of women only support sessions.”

Another described how WISHED had highlighted the need to consider trauma, domestic abuse, exploitation, motherhood and housing insecurity together when assessing vulnerability and support needs, reinforcing the value of a:

“A more person-centred approach, and of creating trusted environments where women feel safe to disclose risk, engage with services, and access support without fear of judgement.”

Overall, the strongest pattern in the data is that WISHED has influenced how women are understood and approached, shifting thinking away from narrow, compliance-led interventions and toward more compassionate and flexible responses.

c) Impact on service delivery and commissioning

There is strong evidence from the survey that WISHED has had a positive impact on wider discussions about service delivery and commissioning for women experiencing multiple disadvantage. Several respondents explicitly referred to WISHED as demonstrating *“a different approach”* to supporting women, rooted in Trauma-responsive , creative and nature-based practice. One respondent described the programme as providing *“great learning for WWIN”*, particularly in strengthening the evidence base to campaign for *“trauma-informed practice using creativity, nature and holistic therapeutic support.”*

Another respondent stated that:

“The Programme as shown a different approach of how to support women in this space”

And had highlighted:

“The benefits of a trauma informed approach, and creative, nature-based healing.”

A further response noted that WISHED had:

“Positively influenced wider discussions around how services are delivered and commissioned for women experiencing multiple disadvantage,”

Including increasing awareness of the barriers women encounter in fragmented systems and encouraging stronger collaboration across health, housing, safeguarding, domestic abuse and substance use services.

At the same time, the data suggests that implementation is not uniform across organisations. One respondent stated that they were aware of commissioning considering learning from WISHED, but that Housing Options had “not implemented anything specifically.” This suggests that while WISHED is influencing strategic thinking and shaping debate, changes to operational delivery are developing unevenly and may take longer to embed.

d) **Influence on procedures and policies**

The survey suggests that WISHED has had greater influence on practice discussions and organisational reflection than on formal policy change, at least at this stage. One respondent stated that the programme had been:

“Part of a wider piece to work to better understand how to support women with multiple unmet need.”

And that the programme and evaluation would:

“Continue to be cited in future insights used to develop policy and procedure.”

This indicates that WISHED is already being used as an evidence base for future policy development. Another response similarly noted that the programme had:

“Contributed to ongoing reflection and review of organisational approaches.”

While acknowledging that this did not always result in formal policy change directly. However, the same response emphasised that WISHED had helped to embed greater awareness of Trauma-responsive and gender-sensitive approaches, encouraged more flexibility within procedures, and reinforced the importance of partnership approaches and information sharing.

These findings suggest that WISHED is currently exerting influence most strongly at the level of culture, reflection and practice, with formal procedural or policy change likely to emerge over time as the learning becomes more embedded.

e) Wider organisational and cultural change

One of the strongest themes emerging from the survey is that WISHED has contributed to wider organisational and cultural change, beyond the programme itself. Several respondents described concrete developments that had arisen from learning from WISHED. One reported:

“We have a weekly project set up in Sunderland City Centre called SISTERS utilising learning from our fantastic experience with the WISHED programme.”

Another noted that a practitioner had *“developed a locally based support day for women”* based on learning from WISHED. Other survey responses point to broader shifts in organisational awareness and practice culture. One respondent wrote that WISHED had:

“Given the wider workforce the opportunity to ‘see for themselves’ the impact of trauma informed practice, meeting people where they are and the difference this can make to the women’s recovery journey.”

Another stated that the programme had:

“Strengthened understanding of gender-informed and trauma-informed practice across the wider system.”

And had contributed to:

“Wider cultural change by increasing awareness of the impact of trauma, stigma, and adverse experiences on women’s engagement with services.”

There is also clear evidence that the programme has increased recognition of the value of lived experience in shaping services, with one respondent noting that WISHED had:

“Helped encourage more inclusive approaches to engagement, co-production, and service development.”

8.4.3 Qualitative Narrative Account of Learning Events

Feedback collected from participants at the end of each of the three WISHED learning events; held in July 2025, February 2026, and June 2026 has been thoroughly reviewed and analysed. This feedback, consisting of 24 reflective responses (a complete sample from all attendees), consistently shows that these sessions have evolved into powerful opportunities for group reflection, shared learning about the system, and relationship-based practice. The conclusions presented below are based entirely on this participant feedback.

Creating Space for Reflection, Connection and Learning

Participants consistently describe the sessions as insightful, inspiring and impactful, emphasising the value of bringing partners together in a shared environment. One attendee described the sessions as *“inspiring, innovative, [and] gave us time to stop and think collectively”*, while another reflected that it was *“impactful, connected, [with] shared understanding.”*

Over time, there is a clear strengthening of collective identity and shared purpose across partners. The events have enabled diverse organisations to come together, with one participant noting it was *“lovely how we have all come together”* and another highlighting the importance of hearing *“different backgrounds, roles, services, but all appeared to have similar thoughts and goals.”*

This sense of collective endeavour is further reflected in participants’ aspirations, including calls for *“more multi agency working”* and a shared commitment to *“really stand by what we have said... and deliver better support.”*

Challenging Systems and Driving Change

A strong theme across all events is the recognition that current systems are not meeting the needs of women experiencing multiple disadvantage. Participants increasingly articulate a desire for the learning to translate into tangible change. One respondent stated:

“This work highlights that our current systems are not consistently meeting the needs of women experiencing multiple harms... the findings shouldn’t sit as insight alone; they must drive tangible system change.”

There is also explicit frustration at systemic constraints, particularly around legislation and rigid service structures, with one participant noting:

“Organisations... are so bound by legislation it becomes difficult to be... person-centred.”

At the same time, the sessions are fostering optimism and agency. Participants describe taking away *“hope”*, *“change”* and *“love”*, alongside a stronger sense of responsibility to embed trauma-informed and compassionate approaches in their own practice.

Embedding Compassionate, Relational Practice

Across the three events, there is a clear and deepening emphasis on compassionate professionalism and relational working. Participants reflect on the importance of understanding lived experience and embedding empathy into everyday practice, noting the significance of:

“The voices of the women and practitioners... [being] powerful in the room.”

This is reinforced by learning takeaways, including the need to *“reflect on a compassionate approach and bring [it] into everyday practice”* and to develop more person-centred responses to trauma and vulnerability.

The Role and Significance of The Barn at Easington

A defining feature of the evaluation is the consistent and powerful endorsement of The Barn at Easington as the setting for these events. Participants repeatedly highlight the atmosphere, environment, and relational tone created by the space, which appears central to the success of the sessions. The Barn is described as a place where people feel immediately safe and able to engage openly. One participant shared:

“Always love visiting The Barn. I feel straight at ease. It’s like chatting to friends but really striving to make a change.”

Others emphasise the importance of the relaxed and non-institutional environment, noting that they *“enjoyed the event in a relaxed environment”* and recognised *“the benefits of a relaxed environment for individuals.”*

The Barn also appears to foster inclusivity and equal participation, with feedback highlighting that *“everyone had a voice”* and contributions from different organisations were respected.

Importantly, participants explicitly link the continuation and expansion of The Barn model to future system change. Aspirations include *“more similar ‘groups’ like The Barn at Easington”* and a desire for the project to continue and influence wider practice.

The environment is not simply a backdrop, but an active enabler of the relational, trauma-informed approach that WISHED seeks to embed. Even incidental comment, such as *“What a beautiful place”* - reflect how the physical and emotional setting contributes to participants’ experience.

Building Momentum and Legacy

Across the three events, there is a clear trajectory from initial engagement toward collective ambition for long-term change. Early feedback focuses on the value of coming together, while later responses increasingly emphasise legacy, sustainability, and system transformation.

Participants express aspirations for the work to become *“business as usual”*, for *“wider system changes”*, and for WISHED to *“truly shape how we respond to women experiencing harms.”* This includes a strong desire to expand the model, with calls for:

“More access to nature-based provisions for women.”

“A network of green spaces of therapy... and housing grounded in feminism and solidarity.”

Continued growth of the WISHED community to “*glow and grow.*”

Overall Narrative

Taken together, the evaluation demonstrates that the WISHED learning events are not simply workshops, but transformative, relational spaces that are actively shaping thinking, practice and ambition across the system.

At the heart of this success is The Barn at Easington, which provides a uniquely enabling environment for:

- Open, honest and equal dialogue.
- Reflection and emotional safety.
- Cross-agency relationship building.
- Embedding trauma-informed and compassionate practice.

The evidence suggests that the model and setting are intrinsically linked with The Barn not only hosting the work, but embodying the principles of safety, relational practice and connection that WISHED seeks to scale across the system.

8.4.4 Key points of opening conversation at final learning event (26.6.2026)

Participant at the final partners learning event on 23.6.2026 were asked to consider key points from the final draft of the WIDHED programme evaluation report and give feedback. The remainder of this section documents the discussion the ensued among the partners. For learning event participants and agencies represented see [Appendix 5](#)

The discussion began with a focus on housing options and challenges in supporting individuals without a legal housing duty. Participants highlight the need for greater flexibility beyond legislative frameworks, particularly when dealing with vulnerable individuals who fall outside formal eligibility criteria.

A key theme is the complexity of defining and responding to homelessness, especially for women. It is noted that some individuals, such as those ‘sofa surfing’ and experiencing sexual and other forms of exploitation, may not meet strict “sleeping rough” definitions. yet remain highly vulnerable. ¹³ Several case-based discussions illustrate the challenges:

- Individuals with multiple vulnerabilities (e.g. substance misuse, exploitation, trauma) struggle to access appropriate services.
- There is an over-reliance on services with strict criteria, leaving complex cases without adequate support.
- Situations are described where people are too vulnerable for available accommodation or are excluded due to perceived complexity.

The conversation also emphasised the value of multi-agency collaboration, allowing professionals to act more flexibly and creatively outside strict legal duties. However, gaps remain in commissioning, pathways, and suitable accommodation options.

Public Health contributors stress the importance of using existing learning to drive strategic change, including piloting women-only services, improving prevention approaches, and ensuring individuals are better supported throughout transitions (such as leaving rehab or prison).

Finally, there is a shared recognition that more intensive, practical, and coordinated support is needed, particularly for those with complex needs, alongside clearer action planning and stronger system-wide responses.

8.4.5 Overall conclusion from partners' learning events

The WISHED programme demonstrates impact beyond individual outcomes, acting as a catalyst for system-wide learning, reflection and change. Evidence from the three partner learning events highlights both the limitations of current systems and the conditions required for more effective responses to women experiencing multiple and overlapping disadvantage.

- WISHED is strengthening trauma-informed, person-centred approaches, particularly for women who may not meet formal thresholds for support but remain highly vulnerable.
- The learning events have prompted critical reflection across partner organisations, challenging rigid definitions (e.g. homelessness criteria) and compliance-led models, and emphasising the need for flexible, relational and discretionary practice.
- Current systems are widely experienced as rigid, fragmented, and not fit for complex need, with evidence of individuals being excluded for being “too complex”, alongside gaps in pathways, commissioning, and appropriate accommodation.
- WISHED has reinforced the importance of multi-agency collaboration, enabling partners to respond more creatively and effectively outside of strict legislative duties, while also highlighting inconsistencies in provision and access.
- The programme is influencing strategic thinking and service development, including a shift toward prevention, improved transitions (e.g. prison release, post-rehab accommodation), and the development of women-specific and trauma-informed provision.
- There is a growing emphasis on intensive, practical and sustained support, recognising that without stable accommodation and foundational support, therapeutic or recovery interventions are unlikely to succeed.
- The programme is contributing to a broader cultural shift toward compassionate professionalism, embedding empathy, trust and the value of lived experience as central to effective engagement.

Importantly, the qualitative narrative from the learning events demonstrates that these shifts are not only conceptual but relational in nature. The Barn at Easington has played a critical role in enabling this process, providing a safe, non-institutional environment in which partners are able to reflect openly, build shared understanding, and collectively reimagine service responses.

Overall, WISHED provides a strong foundation for improving both outcomes and system performance. It demonstrates that flexible, relational and trauma-informed approaches are essential to meeting the needs of women with complex, non-linear experiences, and that the environments in which professionals come together to learn and reflect are integral to enabling this change.

The programme therefore highlights not only the need for continued investment and alignment of commissioning, but also the importance of embedding relational, trauma-informed principles across systems to sustain and scale this model of practice.

9. Conclusion

Drawing together the findings from across the evaluation, the WISHED programme demonstrates both significant and sustained impact for women, alongside important implications for wider systems of support.

The WISHED programme provides a powerful, evidence-based and compassionate model for supporting women with multiple, enduring and overlapping unmet needs, delivering transformational change for participants while also informing wider systems of support. The evaluation demonstrates consistent improvements across all anticipated outcomes, including enhanced wellbeing, confidence, emotional stability, connection and recovery trajectories. These outcomes are particularly significant given that many participants were not effectively engaged by existing services prior to involvement in the programme.

The depth and nature of change observed; including participants describing life-changing and, in some cases, life-saving impacts highlights the effectiveness of the WISHED approach in engaging women experiencing complex trauma, addiction, domestic abuse and housing instability. The programme enables meaningful, sustained change by creating conditions in which women feel safe, valued, and able to reconnect with themselves and others.

Crucially, the evaluation demonstrates that the effectiveness of the WISHED model is intrinsically linked to the environment in which it is delivered. **The Barn at Easington is not simply a setting, but an active and enabling component of the intervention.** It provides a psychologically safe, non-institutional and relational space in which trust, openness and connection can develop. The integration of nature, creativity and community within this environment supports emotional regulation, reflection and engagement, particularly for women who may find traditional service settings inaccessible or unsafe.

This relationship between model and environment is central to understanding the programme's impact. The Barn embodies the principles of safety, connection and non-judgement that underpin trauma-responsive and relational practice. It enables the depth of engagement required for this cohort and demonstrates how the physical and emotional environment of support is not incidental but foundational to outcomes.

Beyond individual outcomes, the WISHED programme has contributed to significant learning across partner organisations. Evidence from partner engagement, including structured learning events and survey findings, shows that the programme is influencing professional practice, strengthening trauma-informed and person-centred approaches, and informing discussions around service delivery and commissioning.

Importantly, the learning events themselves have emerged as a critical mechanism for system change. They provide a reflective, relational space in which professionals from different organisations are able to step outside of organisational constraints, build shared understanding, and critically examine existing systems. In this context, The Barn continues to play a central role, not only in supporting women's recovery, but in enabling professionals to collectively reimagine more effective responses.

As a result, WISHED should be understood not only as a programme, but as a model for system learning and transformation. It demonstrates that effective support for women with multiple and enduring unmet needs requires:

- Trauma-responsive, relational approaches grounded in trust and connection.
- Safe, non-judgemental and, where appropriate, women-only environments.
- Integrated, holistic responses to intersecting needs.
- Flexibility to respond to non-linear journeys and complex circumstances.

The programme also highlights the limitations of current systems, which are often experienced as rigid, fragmented and insufficiently responsive to complexity. Evidence from partners indicates that threshold-driven, compliance-led approaches can exclude the very women most in need of support, reinforcing disengagement and risk.

WISHED therefore provides both a practical demonstration of what works and a challenge to existing models of delivery, commissioning and professional practice. Its contribution lies not only in the outcomes achieved for participants, but in its ability to influence thinking, shift practice and inform more effective system design.

The programme represents:

A highly effective and innovative model of engagement and support

- A relational, trauma-responsive approach that enables access where traditional services often fail.
- A preventative intervention aligned with public health priorities, reducing long-term demand on crisis, housing and safeguarding systems.
- A model that delivers strong economic and social value, with an estimated Social Return on Investment of approximately £4–£7 for every £1 invested.

In the immediate term, ongoing provision such as the Growing Hope initiative at The Barn at Easington offers an opportunity to sustain engagement with a smaller cohort of women, maintaining continuity of relationships and supporting recovery pathways while wider system learning is embedded.

Looking forward, the primary opportunity is not simply to replicate the programme at scale, but to embed the learning from WISHED across systems. This includes integrating relational, trauma-informed and nature-based approaches into existing services, strengthening women-specific provision, and aligning commissioning frameworks with the realities of complex and non-linear need.

The WISHED programme demonstrates that effective support for women with multiple, enduring and overlapping unmet needs is both possible and achievable but requires a fundamental shift in how services are designed, delivered and experienced. Its greatest value lies not only in what it has achieved, but in the clarity, it provides about how systems must evolve.

At its core, WISHED shows that outcomes are shaped not only by what services do, but by how and where support is experienced. The integration of environment, relationships and practice; exemplified by The Barn at Easington, offers a compelling model for future service design, with the potential to reshape both outcomes for women and the effectiveness of the systems that support them.

The economic case for the WISHED model is also compelling. The programme generates an estimated £4–£7 of social value for every £1 invested, while wider indicative projections suggest that, if the model were embedded more systematically, **it could deliver net public service savings of approximately £8,000–£20,000 per woman per year.** These projected savings are linked to reduced demand on high-cost services, including homelessness provision, emergency healthcare, crisis intervention and other acute responses.

Importantly, this financial return is not achieved through cost reduction alone, but through the effectiveness of the model itself. The same relational, trauma-responsive and nature-based elements that improve outcomes for women are those most likely to reduce system churn, prevent escalation and improve the efficiency of support pathways. In this sense, WISHED demonstrates that compassionate, person-centred approaches are not only more effective for women with multiple, enduring and overlapping unmet needs, but are also likely to be more economically sustainable for the wider system.

10. Action plan to advance key recommendations for partner organisations and systems

Representatives from partner agencies who participated in the final learning event (23.6.2026), were asked to express their agreement with the overall recommendations, as summarised in the [Executive Summary](#) of this report.

- c) Embedding trauma-responsive, relational practice across partner services.
- d) Increasing women-specific provision, including safe and supportive environments.
- e) Strengthening integrated, cross-agency approaches for women with multiple, enduring and overlapping unmet needs.
- f) Supporting co-production and lived experience within service design.
- g) Using the WISHED model to inform commissioning, policy and system design, including the appropriate use of Equality Act 2010 Single Sex Exemptions to enable women-only provision where justified.

10.1 Agency and systemic action plan

Participants identified a set of actions to take forward the key recommendations: within their own organisations; and at a systemic level.

Table 5: Action plan to advance key recommendations for partner organisations and systems

Recommendation	The Barn	CGL	WWIN	Public Health	Housing Options	Systemic Actions
a) Embedding trauma responsive, relational practice across partner services.	Continue to develop a trauma-informed practice model through ongoing reflection and “action research”; emphasise safe space as evolving and relational.	Improve understanding of trauma within pathways; respond relationally to need; expand MDT approaches beyond pregnancy to wider “at risk” women.	Fully embed trauma-informed models into policy and practice, advocate for shared trauma framework across Sunderland.	Roll out CNTW trauma training; promote consistent trauma-informed approach across system; link to safeguarding structures. ¹⁴	Expand trauma-informed practice across service; improve responsiveness and efficiency; use data to evidence impact.	Establish shared trauma-informed framework and common language; embed across partnerships; connect to safeguarding, commissioning and system design.

Recommendation	The Barn	CGL	WWIN	Public Health	Housing Options	Systemic Actions
b) Increasing women-specific provision, including safe and supportive environments.	Promote importance of safe, nature-based environments; build understanding of equality and safety in spaces; expand access to green spaces in the locality.	Expand women-only groups and safe spaces; create more opportunities for women to come together; explore dispersed and safer housing options post-treatment.	Advocate for increased housing provision for women experiencing multiple disadvantage and domestic abuse, including access to safe environments and nature.	Commission and test women-only housing provision; explore innovative models and prevention approaches.	Identify risks in existing accommodation, highlight need for appropriate, safe provision for women with complex needs.	Increase women-only provision using informed commissioning; address hidden homelessness and exploitation; expand safe, dispersed housing and non-hostel models.
c) Strengthening integrated, cross-agency approaches for women with multiple, enduring and overlapping unmet needs.	Strengthen links with agencies; share learning on safe environments and wellbeing; understand partner “agendas” to improve collaboration.	Improve coordination across rehab–detox–housing pathways; increase in-reach into prisons and hospitals; embed joint MDT and partnership working.	Work with partners to understand organisational pressures and ‘client’ [sic] need collectively; participate in integrated partnership models.	Lead whole-system partnerships (‘Changing Futures,’ Drug & Alcohol Partnership); mobilise knowledge and share learning across system. 15	Work collaboratively to manage demand and improve referral pathways; build capacity to respond to higher volumes and complexity.	Strengthen whole-system response; improve transitions (prison, hospital, rehab); increase integration of roles across services; reduce fragmentation.

Recommendation	The Barn	CGL	WWIN	Public Health	Housing Options	Systemic Actions
d) Supporting co-production and lived experience within service design.	Use reflective practice to understand lived experience of safety and recovery; embed learning into evolving model (“learning as we go”).	Increase focus on co-production with women in and exiting treatment; use insight to shape pathways and services.	Use co-production to understand housing needs of single women; ensure lived experience informs service development.	Develop commissioning approaches that embed “real co-production”; integrate lived experience into system design.	Use qualitative and quantitative data to evidence need and shape service delivery.	Embed co-production across commissioning and partnerships; ensure lived experience informs policy, pathway design and evaluation.
e) Using the WISHED model to inform commissioning, policy and system design (incl. Equality Act Single Sex Exemptions).	Demonstrate evidence of wellbeing impact of nature-based, relational environments, support scaling of similar models.	Identify gaps in detox, rehab, housing and post-treatment pathways, advocate for improved funding and consistent provision.	Advocate for increased housing stock and funding for women experiencing multiple disadvantage; link learning to policy and DARD findings.	Use WISHED to influence commissioning (women-only housing, co-production models); disseminate learning and research across system.	Evidence need through data; leverage funding opportunities; highlight structural limitations in current housing system.	Apply WISHED learning to commissioning and system design; expand Housing First, dispersed housing and women-only provision (where justified); align funding, prevention and long-term support.

10.2 Key Sunderland-specific success indicators

The following success indicators were formulated by the learning facilitator and evaluator after the event; and informed by the following research provided by the System Change Lead for Inclusion Health, Public Health and Integrated Commissioning, Sunderland City Council.

- “Understanding the unmet health needs of people struggling with alcohol and / or other drug use, with or without homelessness, in Sunderland. Key Findings to Support Intervention Development - July 2024.” Emma-Joy Holland, Liz Titchener, Sarah Schonewald and Kat Jackson, on behalf of the Sunderland PLUS Research team.
- Sunderland PLUS: Pen Portraits.

Improved access and engagement

- Increased uptake of primary care and support services, particularly among individuals without fixed addresses or with ‘complex’ [sic].
- Reduction in missed appointments and disengagement linked to barriers such as waiting times, stigma, or system complexity.
- Improved ability of services to respond within critical “windows of opportunity” for engagement.

Increased trust, safety and service experience

- Reduction in reported stigma and negative experiences within services.
- Increased reports of individuals feeling respected, valued and listened to.
- Greater continuity of relationships between practitioners and service users, supporting disclosure and sustained engagement

More effective trauma-informed and person-centred practice

- Consistent application of trauma-informed approaches across services.
- Evidence of flexible, relational responses rather than compliance-led practice.
- Reduced reliance on individuals to navigate complex systems independently.

Improved health and wellbeing outcomes

- Increased early intervention for untreated health conditions (e.g. wounds, infections).
- Improved engagement with alcohol and substance-related health pathways, including liver health support.
- Reduction in escalation to emergency or crisis care.

Stronger system integration and pathways

- Fewer inappropriate exclusions or “too ‘complex’ [sic]” referrals across services
- Improved transitions between services (e.g. prison release, rehab, housing)
- Increased multi-agency working and shared accountability for ‘complex’ [sic] cases.

Expansion of women-specific and safe provision

- Increased availability and use of women-only services and safe environments.
- Improved outcomes for women experiencing hidden homelessness, exploitation, or domestic abuse.
- Greater access to safe, non-institutional environments that encourage engagement.

Embedding co-production and lived experience

- Increased involvement of lived experience in service design and delivery.
- Expanded use of peer roles to support engagement and navigation of services.
- Evidence that services adapt based on feedback from women with lived experience.

Summary

Collectively, these indicators demonstrate a shift from a rigid, fragmented system toward a more responsive, relational and trauma-informed model, with success defined not only by service outputs, but by:

- Trust and engagement.
- Timeliness and flexibility of response.
- Reduction in systemic barriers.

h) Improved experiences and outcomes for women with multiple, enduring and overlapping unmet needs.



Figure 21: Partners at end of final learning event - The Barn at Easington 23.6.2026

Afterword - Poem by Chelsea Gonzales, WISHED (April 2026)

Sober

My question is,
Is Sober a person,
Is Sober violent,
Is Sober anger,
Is Sober controlling me.
I'm scared of Sober.
I'm strong.
Is Sober a person?



Figure 22: Week 4 at The Barn (Tranche 2) — Beauty Through the Lens 2

Appendix 1: Participants in practitioners' focus group and partners' learning events

Participants at partners & practitioners learning event 25.7.2025:

1. Nicola Balfour - The Barn at Easington
2. Marie Warby - The Barn at Easington/ FREE Women's Community
3. Alison Maitland - The Barn at Easington/ FREE Women's Community
4. Julie Wearmouth – City of Sunderland Council
5. Michelle Snaith – Change, Grow, Live.
6. Leanne Riddell – Housing Action Team (Sunderland)
7. Katie Wheatley – WWIN Domestic Abuse Service
8. Dan Banks - Change, Grow, Live.
9. Jeannie May Adams- The Barn at Easington

Apologies:

- Laura Seebohm – WWIN Domestic Abuse Service
- Sarah Norman – City of Sunderland Council
- Michelle Payne – City of Sunderland Council
- Justin Collins– City of Sunderland Council
- Kate Coverdale– City of Sunderland Council
- Jaydean Dionysios – City of Sunderland Council

Participants practitioners focus group on 15th December 2025:

1. 'Lived experienced' practitioner – Marie Warby.
2. 'Lived experience' volunteer – Ali Maitland.
3. Kitchen support/ practitioner – Jeannie Adam.
4. Artist-practitioner – Kath Bedlington.
5. Lead artist-practitioner, Nicola Balfour.
6. Dr Sue Robson – WISHED Project evaluator.

Participants practitioners focus group on 11th May 2026:

1. 'Lived experienced' practitioner – Marie Warby.
2. 'Lived experience' volunteer – Ali Maitland.
3. Lead artist-practitioner, Nicola Balfour.
4. Dr Sue Robson – WISHED Project evaluator.

Apologies:

- Kitchen support/ practitioner – Jeannie Adam.
- Artist-practitioner – Kath Bedlington (reflections gathered during participant focus group on 27th April 2026, and by email).

Participants in key partners learning event 6th February 2026:

1. Dan Banks – Wear Recovery (CGL)
2. Dr Sue Robson – WISHED Project evaluator.
3. Jaydean Dionysios - Public Health, City Council. (Domestic Abuse & VAWG)
4. Julie Wearmouth – Public Health, City Council.

5. Laura Seebohm – WWIN.
6. Michelle Payne – Sunderland Housing Options Team.
7. Michelle Snaith – Wear Recovery (CGL).
8. Nicola Balfour – The Barn at Easington.
9. Sarah Norman – Sunderland City Council.

Apologies:

- Emma Skelton – Wear Recovery (CGL).
- Justin Collins - Sunderland Housing Options Team
- Kate Coverdale– Sunderland City Council
- Katie Wheatley _ WWIN
- Leanne Riddell - Sunderland Housing Options Team

Participants in key partners learning event 23rd June 2026

1. Dan Banks – Change Grow Live (Wear Recovery)
2. Jaydean Dionysios – City of Sunderland Council (Public Health)
3. Justin Collins - City of Sunderland Council (Housing Solutions)
4. Katie Wheatley – WWIN Domestic Abuse Services
5. Katy Symonds – note-taker
6. Michelle Snaith – Change Grow Live (Wear Recovery)
7. Nicola Balfour – The Barn at Easington
8. Sarah Norman – City of Sunderland Council (Public Health)
9. Sue Robson – Evaluator

Apologies

- Julie Wearmouth - City of Sunderland Council (Public Health)
- Laura Seebohm – WWIN Domestic Abuse Services
- Leanne Riddell - City of Sunderland Council (Housing Solutions)
- Michelle Payne - City of Sunderland Council (Housing Solutions)

Appendix 2: Characteristics and impacts of “traditional” and “compassionate” professionalism (from Tranche 2)

Dominant characteristics	Potential impact
Traditional professionalism	
Dictatorial approaches, power-over dynamic, ego, chain of command, reliance on rules and regulations, safeguarding rules, non-emotional policies, harsh boundaries, cold-hearted, unapproachable, formal dress, business-like persona, “do as I say, not as I do”, looking down on others, emotional distance, lack of compassion, risk-averse, avoidance of informal language	Barriers to meaningful engagement and support for women living with trauma and addiction, impersonal and detached atmosphere, less supportive, less compassionate, less inclusive
Compassionate or passionate professionalism	
Compassion, kindness, warmth, gentleness, caring attitude, empathy, love, approachability, personability, openness, honesty, active listening, understanding, support, advocacy, unity, playfulness, softness, trust, authenticity, healthy boundaries, safe and inclusive spaces, relevant expertise, willingness to take risks	Genuine connection, safety, support, welcoming and supportive environment, trust, relatability, collective learning, human connection, safe space for open dialogue, inclusive environment, better meets needs of service users

Appendix 3: Critical changes are necessary to embrace compassionate professionalism in key partner organisations (from Tranche 2)

Area for Change	Description
Embedding trauma-responsive and person-centred practice	Deepen understanding of trauma, reflect trauma-responsive practice in policies and interactions, integrate compassion, prioritise person-centred and humanistic training, move beyond rigid structures.
Exercise kindness, choice, and open-communication.	Treat people with kindness and compassion, offer choices and guidance, pay attention to verbal and non-verbal communication, consider language, body language, and manner, ensure interactions are approachable.
Creating a meaningful shift in organisational approaches.	Organisations should be approachable from the point of entry and throughout practice and treatment. Promote compassionate professionalism internally and externally, create collaboration opportunities, let go of traditional professionalism, embrace unlearning.
System and policy redesign.	Commissioning model needs redesign, shift to co-commissioning, embed lived experience in policy and governance, respect lived experience as equal partners and decision-makers.
Focusing upon relationships.	Balance work towards relationship-building, target 80% relationship-focused interaction, 20% intervention-based work, reinforce compassion and passion in professional practice.
Exercising critical awareness of language and terms.	Critically reflecting upon the language and terminology we use to refer to those who participate in practices, services and treatment, and how it shapes and structures relationships and dynamics of power and empowerment e.g. terms such as “service user” and “lived experience practitioners” can reinforce hierarchical power relationships and ‘othering.’ ¹⁶

Appendix 4: Key messages for the Public Health & Well-Being Directorate (23rd February 2026)

Theme	Description
Challenging traditional approaches.	Move away from rigid policies, procedures and hierarchical attitudes; recognise broader context and impact of different work approaches.
Meeting people where they are.	Letting go of strict professionalism, unlearning, genuine engagement, meeting people on their own terms, meaningful connections.
Collective change at the heart.	Transformation is shared; love, nature and compassion at centre; environment for lasting change.
Bravery and value for money.	Brave steps generate value for money; innovative and courageous actions produce tangible benefits.
Listening and learning.	Seeking reflective and meaningful feedback at all levels , asking questions ("What has helped?", "What would you like to happen?", "What would you change?", "What has not worked?"), voices inform actions.
Flexibility, compassion and creativity.	Flexible and compassionate approach, meeting people where they are, creativity in developing change, adapting to evolving needs.
Evidence of positive outcomes.	The WISHED Project at The Barn at Easington: increased confidence, self-acceptance, personal growth, evidence of effectiveness.

Appendix 5: WISHED programme: Proposed revised service specification

1. Introduction

This proposed service specification was developed through reflective learning from the 2025–2026 WISHED pilot programme, drawing on evidence from participant outcomes, practitioner experience and partner feedback.

The pilot demonstrated both the effectiveness of the WISHED model in supporting women with multiple, enduring and overlapping unmet needs, and the level of intensity and resource required to deliver this work safely and effectively. The revised specification therefore reflects a more realistic and informed model of delivery, based on what has been learned about how best to engage and support this cohort.

The specification also incorporates learning from practitioner focus groups and partner workshops, particularly in relation to:

- The importance of high staff-to-participant ratios.
- The need for flexible, relational and trauma-responsive approaches.
- The role of nature-based, creative and women-only provision in enabling engagement.
- The importance of embedded reflection, evaluation and partnership working.

While this specification outlines a potential future model for delivery, it should be understood within the wider context of the evaluation findings, which indicate that the greatest opportunity lies in applying and embedding the learning from WISHED across services, commissioning and system design, as well as informing any future programme development.

2. WISHED Target group

Women in Sunderland with multiple, enduring and overlapping unmet needs, in relation to such as violence against women and girls (VAWG), mental health issues, trauma-based addiction, homelessness etc. Including :

- Women who are classified as “rough sleepers.”
- Women in active addiction.
- Women who are isolated and struggling to access/ or maintain any type of recovery support.

It is estimated this upscaled programme of 36 sessions could support 30 women over the course of 12 months.

3. Ethos of the WISHED programme

WISHED is a compassionate, trauma-responsive, and relational approach rooted in evidence that women heal and grow best in safe, non-judgemental environments where lived experience, connection, creativity, nature, friendship and sisterly love are at the centre of support.

WISHED ethos reflects a shift from traditional, hierarchical service models to what your report describes as “compassionate professionalism”, where kindness, connection and shared humanity are central to achieving meaningful change.

4. Single Sex Exemption (SSE)

On the basis of evidence that WISHED is a proportionate means of achieving a legitimate aim for women with multiple unmet needs, including VAWG and trauma-based addiction; The Equality Act 2010 SSE applies to the programme.

5. What the WISHED programme offers

WISHED offers a safe, non-judgemental, arts and nature-based programme that builds connection and confidence. Leading to self-empowerment through creativity, relationships and holistic support.

WISHED is **not** an addiction recovery programme. Whilst the programme is known to enhance recovery support, it does not replace it. WISHED is also shown to support women to be more able to access addiction recovery by restoring women’s sense of self-worth and hope.

6. Referral pathways

Referral pathways into the WISHED programme should be based upon an intuitive, organic and informal system, rather than a tick-box exercise. Referrals tend to be drawn from WWIN, MARAC, CGL existing case-load and/ or women perceived to need additional support.

Learning from the WISHED pilot programme has identified that there needs to be more communication and deliberation between the WISHED practitioner team around individual referrals; including the potential for existing tensions between women entering the programme, and how these will be safely and amicably managed and addressed.

7. How the WISHED programme is structured

WISHED is entirely based on a rewilded farm on the East Durham coast at The Barn at Easington.

To provide more continuity of support for the women, 36 Arts and nature-based sessions should be delivered per year, from March through to December; following the seasons, of Spring, Summer and Autumn, but missing out the Winter months of January and February when the weather can be harsh and the access to The Barn can be difficult.

Based upon learning from the plot programme, Arts and nature-based sessions should take place on a week-day from 10:30 to 14:00 (3.5 hours) with the following structure:

- 10:30 - Arrival, warm welcome, outlining theme for session, and chat/ catch up.
- 11:00 – Being in nature and offer of forest bathing.
- 11:45 – Arts/ creative activity.
- 12:45 – Lunch with produce from the “Growing Hope” market garden.
- 13:15 – Completing creative activity.
- 13:45 – Reflection and offer of meditation.
- 14:00 – Session close, hugs and goodbye until next time.

So that each individual women get as much out of the programme as possible; WISHED Arts and nature-based sessions should be rooted in co-operation and collectively, at the same time as being person-centred.

A high proportion of women who would potentially benefit from WISHED are likely to have mental and physical health problems associated with living with addiction and having multiple, enduring and overlapping unmet needs. Adjustments should be made to the programme to ensure these women can access it safely and comfortably.

Given the high staff ratio, if necessary two practitioners should stay in The Barn with those who are unable or do not wish to go out in nature or participate in activities such as forest bathing or meditation. Everything in the WISHED programme is an offer, women should never feel under pressure to participate in something they are not comfortable in; whilst also being supported and encouraged to step out of their comfort zone if and when they feel ready.

8. Transport to and from The Barn at Easington

The intention is for women from all areas of Sunderland to be able to access the programme; with pick-ups in Houghton-le-Spring, Washington and Sunderland (North and South).

If necessary, women should be picked up from their door, at home or where they are staying. This will require additional resources, perhaps a self-drive minibus and 2 staff picking women up (so one can drive). Community mini-bus options need to be explored.

9. Numbers of women supported, and staff ratios

WISHED should be a rolling programme of support, with a maximum of 12 women in each nature-based session.

Women should be able to join the programme at any time (providing there is spaces in the session). The principal is to nurture an organic network of support and friendship among women participating in the WISHED programme (past and present).

The necessary staff to participant ratio is 2:1, meaning that there must be at least six artists/ practitioners in each session:

- a) Lead artist/ Forest bathing practitioner.
- b) Second supporting nature-based artist.
- c) Agency based practitioner (employed and paid by Change Grow Live, Wear Recovery).
- d) Practitioner with grassroots experience in female addiction recovery (1).
- e) Volunteer practitioners with grassroots experience in female addiction recovery (2).
- f) Support worker/ kitchen assistant.

Justification Volunteer Role (Lived Experience Practitioner).

The WISHED model includes a supported volunteer role to value lived experience and enhance programme effectiveness. Practitioners with lived experience build trust, reduce stigma, and engage women not reached by traditional services. This role offers structured ways for women with trauma and recovery backgrounds to participate and develop skills, while subsistence, travel costs, and training budgets (see [appendix 6](#)) ensure ethical support and sustainability. Maintaining a core team of paid professionals preserves quality and safety, while peer involvement boosts authenticity and community capacity. This approach aligns with WISHED's ethos and broader policy on co-production and empowerment.

10. How women new to the WISHED programme are supported

Women should be able to join the WISHED programme at any time and stay as long as they need to.

Women new to the programme, should have a practitioner allocated to them for one-to-one support wherever possible. Women should be eased into the programme with minimal expectations placed upon them.

The WISHED ethos of friendship and sisterly love that is imbued into the programme means that new women should be supported and held by both practitioners and fellow participants alike.

11. Pathways of additional support from women involved in the WISHED programme

As stated, WISHED is **not** an addiction recovery programme, it does not seek to replace existing addiction recovery and treatment services. nor other services for women. The programme intended to enhance recovery support, not to replace it.

The intention is that having a restored sense of self-worth, hope and agency from the WISHED programme; women should be more open to engage in other support and treatment services. However, what is critical about WISHED is that partner agencies (e.g. Housing support, VAWG services, addiction recovery and treatment and public health etc.), understand the adjustments that they need to make to secure women's engagement, based upon the emerging learning from the programme.

It is also imperative that while women's health and well-being may show improvements as a result of their participation in the WISHED programme; they remain open on the case-loads of agencies such as Change Grow Live. To do otherwise is shown to be potentially harmful for women.³

12. Embedding reflection and learning into the programme

An evaluator must be appointed to the project to facilitate and embed learning across all levels; and to share and disseminate this in an interim and annual evaluation report.

- a) **Participants** – should be encouraged and supported to complete weekly reflection sheets which they can keep for the personal journals that are provided by the programme (copies sent to the programme evaluator). Likewise with baseline and end or project self-assessment based upon the Edinburgh well-being scales; women should keep copies, so that they can reflect and evaluate upon their personal development within the programme.

There should be three facilitated evaluation and review focus groups per year to draw out participants learning and personal development from the programme and identify changes or adjustments that need to be made to better accommodate their needs.

- b) **Practitioners** – should spend time either immediately after/ or following the session (by WhatsApp), reflecting upon each Arts and nature-based session. This should include reviewing all weekly reflections sheets and well-being self-assessments, to tune into any unspoken needs, and discuss how women can be best supported. There is never room for complacency, even if things seem to be going well.

There should be three facilitated evaluation and review focus groups per year to draw out practitioners learning from the programme and discuss and agree any changes or adjustments that need to be made.

There needs to be an allocation of artist and practitioner time for: communication and discussion around WISHED referrals; end of session reflections; and three evaluative focus groups.

- c) **Partner agencies** – should be required to participate in at least two evaluation and review session per year to reflect upon what can be drawn from the learning from the WISHED programme to inform necessary changes to better meet women's needs at an organisational (services), and structural (policy level).

This service specification should be reviewed alongside Section 4's recommendations, which prioritise integrating WISHED programme learnings across systems. It also details future requirements for a full 12-month WISHED programme, based on delivery capacity and the budget in Appendix 6.

³ Two women relapsed after being 'closed' to CGL during the pilot project,

13. Overview

The WISHED programme delivers a trauma-informed, relational, arts and nature-based intervention for women with multiple, enduring and overlapping unmet needs, including trauma, addiction, domestic abuse and housing instability.

This appendix outlines:

- The proposed budget for 12-month delivery (based upon 2026-2027 costs).
- The workforce model, including the supported volunteer role.
- An outline Social Return on Investment (SROI).

The WISHED programme can be delivered for approximately £86,500 per year, supporting 25–30 women with enduring unmet needs through a high-intensity, trauma-informed and nature-based model. The programme demonstrates strong value for money, delivering preventative impact across health, housing and safeguarding systems, with an indicative return of £2–£3 for every £1 invested.

The increase from the scaled pilot cost estimate (£67,500) reflects learning from delivery and the need to maintain quality and safety at scale. This includes sustaining a high staff-to-participant ratio, introducing a supported lived experience role, strengthening evaluation and reflective practice, and improving transport access for the most vulnerable women. These enhancements ensure that scaling up does not dilute impact and supports the programme's preventative effectiveness.

Appendix 6: Indicative budget for the proposed WISHED service specification

This appendix sets out an indicative budget for delivering the proposed WISHED service specification in Appendix 6. It reflects the level of resource required to safely deliver a high-intensity, trauma-responsive and relational model for women with multiple, enduring and overlapping unmet needs, and should be considered alongside the report's recommendations for wider system change.

2. Total Programme Cost

Category	Total
Programme delivery	£48,840
Practice development	£6,200
Evaluation	£6,450
Management and overheads	£25,000

Total annual cost: £86,500.

Cost context:

- Women supported annually: 25–30.
- Cost per participant:
 - £3,460 (based on 25 women).
 - £2,883 (based on 30 women).

3. Programme Budget (12 Months)

Delivery model:

- 36 sessions per year.
- Rolling cohort of approximately 25–30 women.
- Maximum 12 women per session.

3.1 Programme Delivery

Session staffing.

Role	Rate	Sessions	Total
Lead artist / forest practitioner	£250	36	£9,000
Supporting artist	£220	36	£7,920
Grassroots practitioner (paid)	£200	36	£7,200
Support worker / kitchen	£150	36	£5,400

Subtotal – staffing: £29,520

Volunteer (lived experience role)

Item	Total
Travel and subsistence (£30 × 36 sessions)	£1,080

Item	Total
Training, supervision and development	£1,500

Subtotal – volunteer support: £2,580

Session costs.

Item	Total
Barn hire (£80 × 36 sessions)	£2,880
Food (£40 × 36 sessions)	£1,440
Creative materials	£2,250
Gardening / nature materials	£2,250

Subtotal – session costs: £8,820

Transport.

Item	Total
Transport (£220 × 36 sessions)	£7,920

Programme delivery subtotal. £48,840

3.2 Practice Development, Reflection and Learning.

Item	Total
Three learning and reflection workshops	£4,200
Weekly practitioner reflection time	£2,000

Subtotal: £6,200

3.3 Monitoring, Evaluation and Reporting.

Item	Total
Freelance evaluator (approximately 15 days)	£5,250
Interim and final reporting	£1,200

Subtotal: £6,450

3.4 Programme Management and Administration.

This includes:

- Coordination with partner organisations.
- Safeguarding oversight and referral management.
- Weekly operational planning and communication.
- Financial management and reporting.

Total: £25,000

Appendix 7: Detailed Indicative SROI: WISHED System Change (3-Year Embedded Scenario)

Indicative analysis suggests that implementing the WISHED model at scale could generate net public service savings of approximately £8,000–£20,000 per person per year, driven by reduced demand on homelessness services, healthcare and crisis systems.

At system level, this equates to potential annual savings in the region of £0.5m–£2m+ depending on cohort size, with further long-term savings expected through improved health, stability and reduced system churn.

These estimates are indicative and based on national evidence (e.g. Housing First cost-benefit analysis and UK homelessness cost studies). A full local SROI model would require linking individual-level data across housing, health, criminal justice and social care systems.

1. Core Unit Cost Benchmarks (UK Evidence)

Homelessness / Rough Sleeping

- £12,260 per person/year (average public service cost of rough sleeping).¹⁷
- Up to £20,128 per person/year (historic) and higher when inflation-adjusted.¹⁸

Housing First (Gold Standard Comparator)

- £7,700 cost per person/year.¹⁹
- £15,880 savings per person/year → Net saving: ~£8,000 per person/year.

Health & Alcohol Harm Costs

- Alcohol harm costs England £27.4bn annually, including:
- £2.2bn on hospital admissions
- £1bn+ on A&E activity.²⁰
- → Demonstrates high-cost system pressure from late intervention.

2. Indicative Per-Woman SROI (Annualised)

Scenario: Woman with complex need (typical cohort from data)²¹

Table 6: Indicative Per-Person SROI (Annualised)

Cost Type (without intervention)	Estimated Annual Cost
Rough sleeping / unstable housing	£12k–£20k
Health (A&E, admissions, untreated conditions)	£2k–£10k+ (variable but significant)
Criminal justice / crisis services	£5k–£12k (where applicable)
Total system cost (typical range)	£20k–£40k+ per person/year

→ Consistent with evidence that multiple disadvantage drives high-cost service use.²²

Scenario: With WISHED model implemented

Table 7: Indicative SROI with WISHED model implemented

Intervention Cost	Estimated Value
Integrated support + housing + trauma-informed provision	~£7k–£10k per person/year

3. Net Impact

Savings: **£8k–£20k** per person/year (depending on prior cost intensity)

- ➡ Conservative midpoint used for reporting:
✔ **£10,000** net saving per person per year

4. Scaling to Sunderland System Level (Indicative)

Example Scenarios

Low-impact cohort (50 women)

- £10k saving × 50
➡ £500,000 annual saving

Medium cohort (100 women)

- ➡ £1 million annual saving

High-impact cohort (200 women)

- ➡ £2 million annual saving

5. Additional System-Wide Cost Avoidance

These are harder to monetise precisely but strongly evidenced:

Healthcare savings

- Reduced A&E attendance and hospital admissions.
- Earlier treatment of wounds and conditions (avoiding escalation).²³

Criminal justice savings

- Reduced contact with police, courts and custody
- Evidence from Housing First shows reductions in offending behaviour.²⁴

Social care and safeguarding

- Reduced crisis intervention and child protection escalation.
- Key issue highlighted in Sunderland lived experience (fear of services, 'late engagement').²⁵

6. Long-Term Economic Impact (3–5 Years)

When changes are embedded:

Demand reduction

- Fewer repeat presentations to:
 - A&E.

- homelessness services.
- safeguarding.

Productivity / wider economy

- Reduced dependency on services.
- Improved wellbeing and recovery.

System efficiency

- Less duplication.
- Better use of staff time.
- More effective targeting of high-cost individuals.

7. Key insight

The financial case and moral case are aligned:

- Current system = high-cost crisis response (£20k–£40k/year/person)
- WISHED model = lower cost + better outcomes (~£7k–£10k/year)

 Meaning:

Doing the right thing for women is also the most cost-effective approach for the system.

Notes and references

¹ Warwick and Edinburgh mental well-being scales

<https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs>

² Understanding the unmet health needs of people struggling with alcohol and / or other drug use, with or without homelessness, in Sunderland. Key Findings to Support Intervention Development -July 2024 - Emma-Joy Holland, Liz Titchener, Sarah Schonewald and Kat Jackson, on behalf of the Sunderland PLUS Research team. Sunderland PLUS: Pen Portraits.

³ Part 2: recovery support services - evidence and current provision -

<https://www.gov.uk/government/publications/recovery-support-services-and-lived-experience-initiatives/part-2-recovery-support-services-evidence-and-current-provision>

⁴ Recovery support services and lived experience initiatives -

<https://www.gov.uk/government/publications/recovery-support-services-and-lived-experience-initiatives>

⁵ As endnote 4.

⁶ As endnote 4.

⁷ As endnote 3.

⁸ Systems-wide evaluation of homelessness and rough sleeping -

<https://www.gov.uk/government/publications/systems-wide-evaluation-of-homelessness-and-rough-sleeping>

⁹ “In Love & Anger”, evaluation of the Tina’s Haven pilot project (Dr Sue Robson, 2024)

<https://www.wrc.org.uk/blog/tinas-haven-a-catalyst-for-emancipatory-practice-for-birthmothers-severed-from-their-children>

¹⁰ Caitlyn D. Placek, Lora Adair, Julieta Baker, Susan Robson, “The sociocultural ecology of resilience: A comparative study among women in the United Kingdom”, SSM - Qualitative Research in Health, Volume 8.

<https://www.sciencedirect.com/science/article/pii/S2667321525000757>

¹¹ As endnote 1.

¹² As endnote 1.

¹³ For the purposes of conducting rough sleeping street counts and evidence-based estimates, the Ministry of Housing, Communities and Local Government (MHCLG) defines people who sleep rough as:

-
1. People sleeping, about to bed down (sitting on/in or standing next to their bedding) or actually bedded down in the open air (such as on the street, in tents, doorways, parks, bus shelters or encampments).
 2. People in buildings or other places not designed for habitation (such as stairwells, barns, sheds, car parks, cars, derelict boats, stations, or “bashes” which are makeshift shelters often comprised of cardboard boxes).

<https://www.gov.uk/government/publications/health-matters-rough-sleeping/health-matters-rough-sleeping#rough-sleeping-and-its-causes>

¹⁴ Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust.

<https://www.nhsfindyourplace.co.uk/our-trusts/cumbria-northumberland-tyne-and-wear/>

¹⁵ The Changing Futures programme aims to improve outcomes for adults experiencing multiple disadvantage – including combinations of homelessness, substance misuse, mental ill health, domestic abuse and contact with the criminal justice system.

<https://www.gov.uk/government/collections/changing-futures>

Funding for Sunderland

Sunderland is new to Phase 2 of Changing Futures. Its funding is allocated over three years as follows:

- Year 1 (2026/27): £458,146
- Year 2 (2027/28): £916,292
- Year 3 (2028/29): £916,292
- **Total allocation 2026–2029: £2,290,730**

<https://www.gov.uk/government/publications/phase-2-of-changing-futures-2026-to-2029-allocations-to-areas/phase-2-of-changing-futures-allocations-to-areas>

¹⁶ “Othering” is defined here as “a process in which, through discursive practices, different subjects are formed, hegemonic subjects – that is, subjects in powerful social positions as well as those subjugated to these powerful conditions.”

https://www.academia.edu/42889355/Othering_and_its_effects_exploring_the_concept

¹⁷ Understanding the Multiple Vulnerabilities, Support Needs and Experiences of People who Sleep Rough in England: Initial findings from the Rough Sleeping Questionnaire (2020) -

https://assets.publishing.service.gov.uk/media/5fd8e3a18fa8f54d60878af7/Initial_findings_from_the_rough_sleeping_questionnaire_access.pdf

¹⁸ Cost of homelessness - <https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/cost-of-homelessness/>

¹⁹ Government's final evaluation report for its three regional Housing First Pilots - <https://homeless.org.uk/news/building-a-case-for-housing-first-regional-pilots-final-evaluation-report/>

²⁰ Alcohol harm costs - Institute of Alcohol Studies - <https://www.ias.org.uk/factsheet/economy/>

²¹ As endnote 2.

²² Cost of homelessness - <https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/cost-of-homelessness/>

²³ As endnote 2.

²⁴ Building a case for Housing First: Regional Pilots final evaluation report <https://homeless.org.uk/news/building-a-case-for-housing-first-regional-pilots-final-evaluation-report/>

²⁵ As endnote 2.