



MAKING HOPE A REALITY

2025 - 2026 IMPACT REPORT





INTRODUCTION



PURPOSE, VALUES & BELIEFS



At Phoenix, we advocate for those often overlooked and stigmatised, ensuring they have a fair chance to lead healthy and fulfilling lives.

What makes hope a reality for us is the dedication and collective will at Phoenix, combined with our expertise in psychosocial treatment, turning dreams into realistic ambitions.

Phoenix is guided by a set of principles contained within our Purpose, Values and Beliefs. We use these guiding principles to help us make decisions and to ensure the way we behave as individual people, and collectively, meet our expectations and the expectations of those we seek to support.

In recent years we have reviewed our Purpose Statement through a comprehensive coproduction process to ensure it reflects the breadth of our delivery our focus on equity of treatment access and the evolving nature of language. The Board agreed a new more inclusive Purpose Statement in March 2024.

OUR PURPOSE

We use our expertise to support people in their personal recovery and to improve their lives. We are dedicated to advocating for people who are often overlooked and stigmatised, to ensure they have a fair chance to lead healthy and fulfilling lives. Our aim is for everyone to be able to achieve their potential for themselves, their families and communities.

OUR VALUES & BELIEFS

WE ARE PASSIONATE ABOUT RECOVERY

Our relentless optimism and energy for overcoming dependency motivates those we help to realise their own recovery. Families, friends, and carers need hope, care and guidance just as much as their loved ones.



WE VALUE OUR HISTORY AND USE IT TO INFORM OUR FUTURE

We believe you can only really know who you are if you understand and respect where you have come from. We have learned much as an organisation over more than 50 years and use that wealth of knowledge to create a bright and brilliant new future for those in need of hope today.



WE BELIEVE IN BEING THE BEST

We constantly strive to learn and innovate, to challenge ourselves, to adapt and to work together with others who can bring valuable expertise. Striving to be the best doesn't mean wanting to be the biggest, it means giving the very best of ourselves to achieve our purpose.



MAKING A DIFFERENCE

OUR MAKING HOPE A REALITY STRATEGY GUIDES US TO WORK TOGETHER TO MAKE HOPE A REALITY, TRANSFORM LIVES AND BUILD A BRIGHTER FUTURE FOR ALL.



Over the last year we have done this by:

Creating more opportunities to save lives and improve health and wellbeing of communities by increasing the reach, capable and inclusivity of our services.

Empowering our staff and volunteers through providing efficient processes and partnerships that enable highly trained and supported staff to thrive.

Striving for a more equitable society that offers hope and equality for all.

OUR WORK IS INFORMED BY OUR GUIDING PRINCIPLES TO ULTIMATELY MAKE THE HOPE OFFERED BY THE UK **DRUG STRATEGY A REALITY** FOR EVERYONE

OVER THE LAST YEAR WE HAVE DIRECTLY SUPPORTED **MORE THAN 17,000 PEOPLE**

97% OF OUR STAFF ENJOY THE WORK THEY DO

71% OF OUR STAFF HAVE EITHER DIRECT OR INDIRECT EXPERIENCE OF SUBSTANCE USE

GENDER PAY GAP REPORTING – **MEAN GENDER PAY GAP 3.3%**

AVERAGE SATISFACTION SCORE FOR OUR SERVICES RATED BY THE PEOPLE WHO USE THEM **9.3/10**

LETTER FROM THE CHAIR



Richard Hill
- Chair, Phoenix Futures

MAKING PROGRESS

As we enter the final year of our strategy, “Making Hope a Reality,” we reflect on our successes and identify areas for future focus to achieve our ambitions. Despite geopolitical and domestic changes, Phoenix remains committed to local communities, families, and people affected by substances. Over the past decade, we’ve learned that national and international politics significantly impact our sector’s ability to deliver on our goals.

Uncertainty is the strategic constraint we face. Yet, the daily needs we witness in our services drive us to achieve the best outcomes for those we serve.

Drug and alcohol-related deaths remain high in England and Scotland. Our key priority is to enhance our services and approaches to protect those at risk.

In 2023, amidst the pandemic and a cost-of-living crisis, we set clear ambitions to address stigma and tackle inequality. We aimed to make care accessible to anyone in need, at the time they need it most. Today, our services are more accessible than ever.

In Aberdeen and Aberdeenshire, Rae House and the city-based dispersed rehab have revolutionised rehab access in Northeast Scotland.

These new environments are high quality places for people to pursue their recovery and our innovative funding model with the Scottish Government has removed traditional barriers to access.

We continue to develop our approaches at New Oakwood Lodge, Harper House, and Ophelia House, reducing barriers for women, families, and people with co-existing mental health needs. These services set a high standard of physical accessibility and like all our services they provide welcoming and inclusive communities.

Phoenix leads the charge for investment in the rehab sector, ensuring anyone who wants access to rehab can achieve it.

Across our community-based services, we specialise in supporting people experiencing multiple and complex support needs. Whether it's vulnerable women in Derby City, homeless people in London through our Rhest service, or those in Essex who find the mainstream systems inaccessible. Offering hope and care to those who might otherwise be left behind is our passion.

We've tackled stigma head-on. Phoenix's unique history in the sector makes us ideally placed to take a lead. We've created a strong team to form The Anti-Stigma Network. The Network continues to thrive, delivering language guides, training and educational opportunities and much more. While initiatives like the anti-stigma strategy at HMP Wayland continue to grow. Working with others we can put an end to stigma.

AS WE MOVE INTO THE FINAL YEAR OF OUR STRATEGY, WE FOCUS ON:

- Expanding our EDI approach to address racial inequality while maintaining momentum on gender equality.
- Increasing the impact of our criminal justice work by expanding psychosocial approaches in prison and community settings.
- Enhancing the visibility of our psychosocial expertise to position ourselves as sector leaders.
- Improving the impact of our Drug and Alcohol Related Deaths (DARD) approach aligned with the OHID National Strategy.
- Implementing our innovative research and development plan.



During a period of sustained growth, and its associated challenges, Karen and her executive team have continued to provide strong and effective leadership to Phoenix. The continued operation of a range of complex services, while delivering new projects and building new capacity, is no easy task, and to the team's credit that they have managed it so elegantly.

Finally, I want to thank our Trustees for their thoughtful and considered approach to governance throughout the year. In particular, thanks should go to Mr. Iain McGourty who stepped down as Trustees after many years of service. They go knowing that they made substantive contributions to the development of the charity.

We are delighted to welcome Mr. Henry Black, Dr. Marcus Mattison and Dr. Shamil Wanigaratne as Trustees who will be adding their expertise and energy to our highly dedicated leadership and governance team.

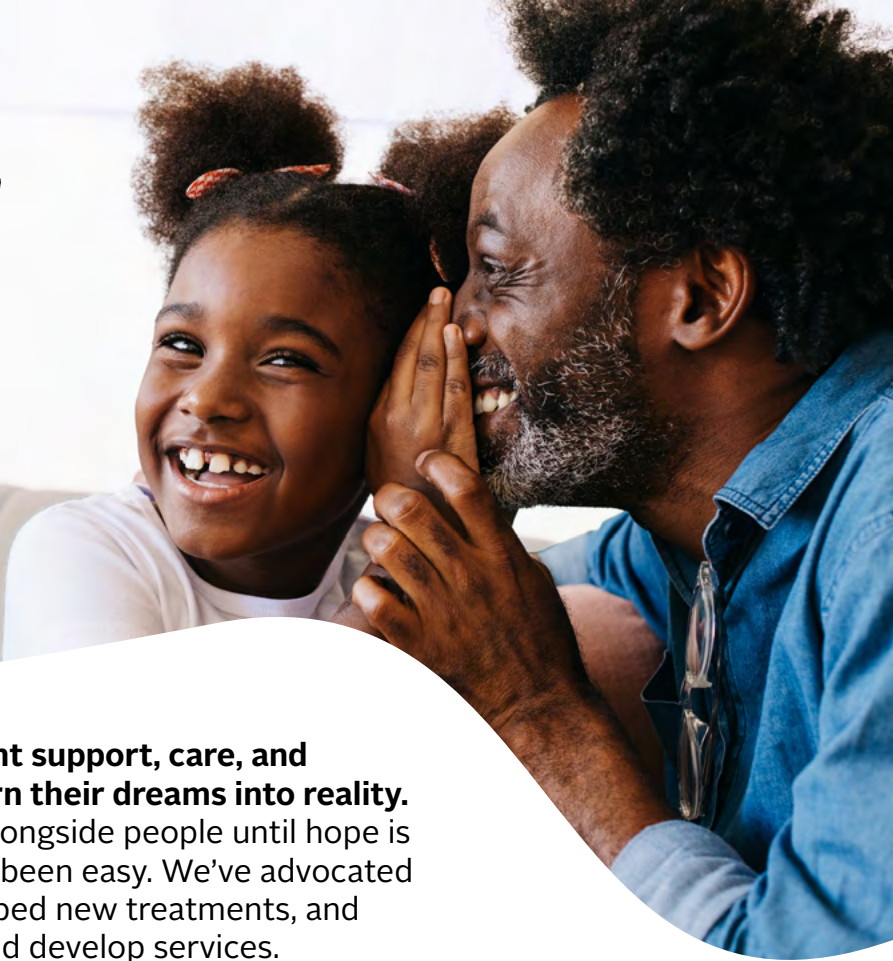
Richard Hill
Chair, Phoenix Futures



MAKING AN IMPACT



MAKING AN iMPACT



At Phoenix, we know that with the right support, care, and guidance, people can find hope and turn their dreams into reality. Throughout our history, we've walked alongside people until hope is within reach. This journey hasn't always been easy. We've advocated for access to necessary support, developed new treatments, and forged partnerships to amplify voices and develop services.

**This year we directly supported over 17,000 people
And indirectly been in touched with many more through a number
of different activities:**

PHOENIX IS A LEADING SPECIALIST IN PSYCHOSOCIAL TREATMENT.

Empowering people facing drug and alcohol challenges – we work with people to set clear incremental health improvement goals in a trusting care relationship. We support people to engage in positive social networks, building confidence and coping skills within a compassionate and structured approach.



WE PROVIDE EXPERT CARE FOR PEOPLE WITH CO-OCCURRING MENTAL HEALTH AND SUBSTANCE USE NEEDS.

Around 60% of people in treatment have a co-existing mental health need, yet many services still struggle to offer integrated care. Phoenix ensures no one is turned away for being 'too complex'.



OUR SPECIALIST SERVICES SPAN BOTH PRISONS AND COMMUNITIES, SUPPORTING PEOPLE IN THE CRIMINAL JUSTICE SYSTEM.

Substance use is a factor in nearly 50% of all acquisitive crimes in the UK. Our work addresses the root causes of offending in a non-judgemental approach, offering a path to recovery and reintegration.



PHOENIX IS THE LARGEST STATE-FUNDED PROVIDER OF RESIDENTIAL REHABILITATION FOR PEOPLE WITH SUBSTANCE USE ISSUES.

Residential rehab remains a vital but limited resource - less than 2% of people in treatment access residential services. Phoenix is proud to lead in expanding this essential support.



WE ARE A REGISTERED HOUSING PROVIDER WITH A SPECIALIST FOCUS ON SUBSTANCE USE.

Stable housing is a key factor in recovery, yet 1 in 5 people leaving treatment report housing problems. Our housing services provide the foundation for long-term stability.



ACROSS THE UK, WE LEAD INITIATIVES THAT CHALLENGE STIGMA, CELEBRATE RECOVERY, AND SHOWCASE THE TRANSFORMATIVE POWER OF TREATMENT.

Despite progress, stigma remains a major barrier to seeking help. Our campaigns and lived experience advocacy are changing perceptions and opening doors.



WE CHAMPION ENVIRONMENTAL SUSTAINABILITY THROUGH A RANGE OF INITIATIVES THAT BENEFIT THE PLANET AND ENHANCE WELLBEING.

Our green initiatives not only reduce our carbon footprint but also improve mental health and community cohesion – aiming for a carbon net zero by 2050.



MAKING CHANGE POSSIBLE

A SERIES OF CASE STUDIES



CASE STUDY:

REVOLUTIONISING REHAB ACCESS IN NORTHEAST SCOTLAND.

We continue to develop our approaches at our residential services in Glasgow, Derby, the Wirral, Oxford and Sheffield reducing barriers for women, families, and people with co-existing mental health needs.

These services set a high standard of physical accessibility and like all our services they provide welcoming and inclusive communities.

In January 2025 we were delighted to be able to add services in Aberdeen and Aberdeenshire to our network of services. **Rae House and the Aberdeen city-based dispersed rehab have offered an integrated model of residential care to the Northeast of Scotland.**





RAE HOUSE, ABERDEEN

RAE HOUSE BRINGS TOGETHER OUR SPECIALISMS IN RESIDENTIAL CARE AND CONSERVATION THERAPY IN A BEAUTIFUL RURAL SETTING.

Funded through a partnership with the Scottish Government the innovative funding model has enabled us to create 80 beds across the region.

The service is located in an ideal rural setting for a centre that combines treatment for substance use and mental health needs with the therapeutic benefits of the natural environment. **We offer support for people to address their health and social care needs, support for the rural economy and conservation of our shared natural environment.** An ideal combination of sustainable personal and environmental growth and recovery.

We have long understood the value of connecting to our environment to support our mental health and wellbeing. In 2001 we developed a therapeutic approach to support people in treatment for drug and alcohol issues to connect to nature and open spaces. Over the last 20 years this work has contributed to the conservation and environmental regeneration of many areas across the UK.

The Aberdeen city-based service offers a complementary urban environment

allowing for broad access and flexible journeys through the services that meet the changing needs of each stage of recovery.

Both the urban and rural environments benefit from services based on principles of Psychologically Informed Environments and Therapeutic Community. These are spaces that are intentionally designed and structured to consider and address the psychological and emotional well-being of the people who occupy them.

The goal is to create an environment that promotes healing, recovery, and personal growth by taking into account the psychological and emotional needs of the people they serve. These are services designed by and for the people that use them.

We were delighted to welcome First Minister of Scotland John Swinney to open Rae House in March 2025. The significant demand for the service since opening has evidenced the desperate need for these innovative services, delivered through a partnership that puts people and communities first.



CASE STUDY:

EQUITY OF ACCESS AND CARE FOR WOMEN.

In 2024 we set ourselves an objective to reduce the specific barrier to access to treatment faced by women.

Traditionally male dominated environments have led to service designs that do not fully cater for the gender-specific needs of women.

Women's patterns of substances use, parenting and wider family care responsibilities vary from those of men. Furthermore, women in treatment are more likely to have experienced domestic abuse, sexual violence, or trauma, and often present with co-occurring mental health conditions such as anxiety, depression, or PTSD.

Whilst many of the needs of men and women are common, the differences matter. Our work to address stigma has demonstrated that women face different gender-related challenges in accessing support. Women often having to work much harder to access appropriate care and overcome prejudice.

Focused on the development of a cross-departmental Equity, Diversity and Inclusion working group, we have taken a strategic approach to ensuring women's needs are considered in a range of aspects of our service delivery.

The aim is to address systemic bias in key areas such as experience of domestic abuse, parenting, women's health and trauma response.

TO BETTER ADDRESS THE HIGHLY PREVALENT HARMS OF DOMESTIC ABUSE:

- The National Specialist Family Service based in Sheffield is the only residential treatment service in England where parents can stay with children in their care. The service enhanced their offer with delivery of the 'You and Me, Mum' domestic abuse course in 2024.
- Phoenix's Reducing Harm Working Group and Serious Incident Review Panel considered Safety Planning guidance and training for people experiencing Domestic Violence.
- We are further rolling the Freedom Programme across all our residential services.



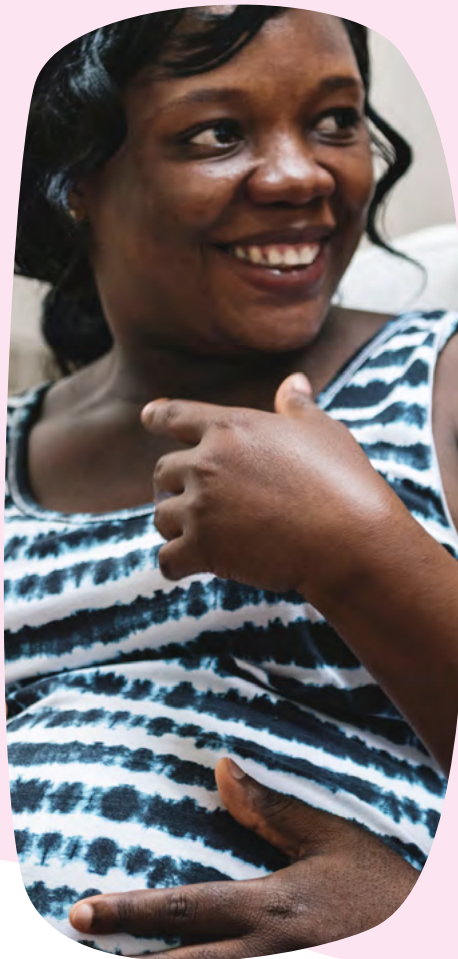
CASE STUDY:

BETTER ACCESS FOR PARENTS.

When seeking support, the wider treatment system tends to view parents as individuals whether they have current care of their children or not.

We want to see parents viewed, valued and supported through their parental responsibilities and relationships.

- To address the fear parents have accessing treatment we are **reviewing safeguarding threshold** when a parent enters treatment to ensure we have a consistent nuanced approach based in a trusting relationship.
- Working with our insurers we have **made it easier for people who have childcare (under school age) responsibilities** to attend community keywork appointments.
- We are seeking to develop improved access through recovery cafes for parents-only flexible drop-in sessions.
- Our community-based family support services offer **flexible appointments if childcare is a barrier** to support with outreach appointments held in cafes and soft plays.



CASE STUDY:

IMPROVED CARE FOR WOMEN'S HEALTH.

On accessing treatment, we have an ideal opportunity to support women's desire for care for a wide range of health needs which may previously be neglected and unsupported.

- Our family residential services provide **enhanced breast-feeding support** engaging with local services to support in line with parental choice of feeding.
- Our residential services have enhanced their approach to ensuring **all women are up to date with their smear test** and this is prioritised in their health care plan.
- Our family residential services have also reviewed **post-natal care** to ensure appropriate checks have been completed with health professionals. This includes review of post-natal depression.
- At Ophelia House the **Hep C mobile testing unit** visits regularly for testing.
- Our Sheffield-based family residential service has also **established links with Sheffield Perinatal Care**. This has included service visits, which enable them to understand the environment and support offered to mothers who may require assistance. Bonding sessions are provided within the service for mothers accessing support, creating a safe and supportive space to explore and strengthen their attachment to their child.



CASE STUDY:

TRAUMA RESPONSIVE SERVICES AS STANDARD.

A systemic trauma-responsive approach is rooted in prioritising emotional safety, trust and transparency, empowerment and choice.

Alongside integrated care delivered by staff who are trained and processes that avoid dynamics of control. As such we ensure that:

- **We provide psychologically informed environments** such as our women-only residential service Ophelia House where models of care, delivery and physical environments have been designed by women for women.
- **Feedback and complaints processes** across Phoenix seek to place people who use services in control of the service they are experiencing.
- **Underpinning our psychosocial approach** is clear communication, expectations and essentially a re-building a sense of trust that many of the women who use our services have lost through previously had poor experiences with state services.

CASE STUDY:

ANTI-STIGMA ACTIVISM IN CUSTODIAL ENVIRONMENTS.

Phoenix have been active in addressing substance -use related stigma throughout our history.

Societal stigma creates a barrier across our services and wider health and social care support vital for health improvement. **We renewed our focus on stigma through the Making Hope a Reality strategy supporting and encouraging services to work with stakeholders to take action.**

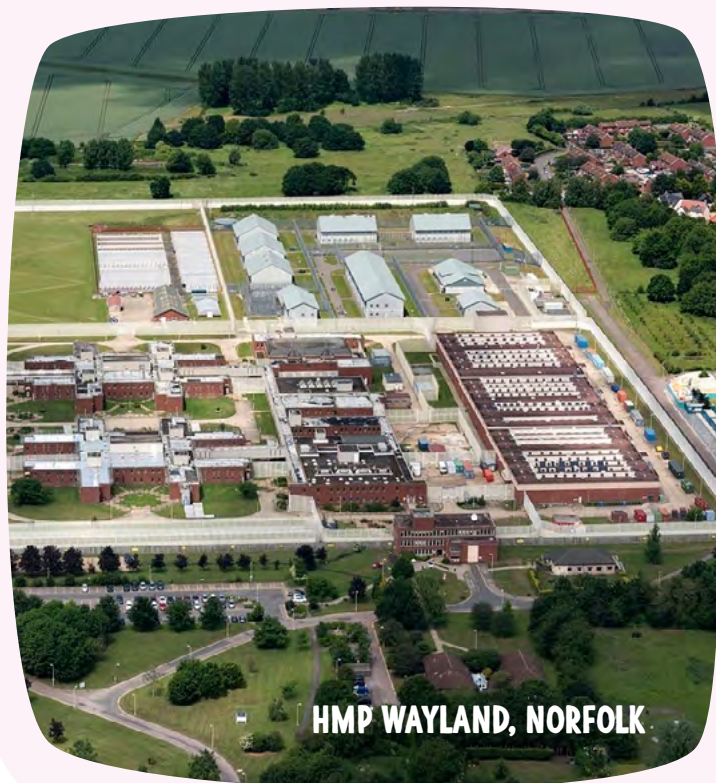
In response to the significant barrier to support that substance use stigma creates. The Phoenix team in HMP Wayland established a dedicated Stigma Committee. This committee is made up of people from across the prison community, including those with both lived and living experience of substance use, as well as key members of staff. The primary aim of the committee is to foster an environment where open, informed, and respectful discussions around stigma can take place, and where action can be taken to dismantle negative perceptions.

Each member of the committee takes on the role of Anti-Stigma Champion, playing an active role in leading and supporting a series of targeted Anti-Stigma campaigns designed to educate and engage the wider prison community. Campaign initiatives have focused on several key areas, including promoting the use of non-stigmatising language, challenging misconceptions, encouraging help-seeking behaviours, and reducing barriers to accessing treatment and support services within the prison.

A central objective of the campaign is to not only address external stigma from others but also the internalised stigma that may of the men in prison with experience of substance use carry themselves. **Internalised stigma can have a profound impact on self-esteem, recovery, and engagement** with rehabilitative opportunities, the campaign seeks to create a prison culture where such barriers are openly acknowledged and actively dismantled.

The impact of the initiative has been significant. The overall culture within HMP Wayland has shifted towards greater awareness, understanding, and compassion regarding issues of stigma. Staff and people in custody alike have reported increased levels of constructive dialogue around substance use and recovery. Furthermore, there has been a measurable rise in the number of people voluntarily coming forward to seek support.

The success of the Stigma Committee initiative at HMP Wayland demonstrates the powerful impact that proactive, peer-led efforts can have in enabling inclusive environments where everyone is switched on to challenging entrenched attitudes and creating a more supportive and rehabilitative environment.



CASE STUDY:

CHALLENGING STIGMA – THE IMPACT OF THE POMS APPROACH

Based in Derby City the Prescription Only Medication Support (POMS) service is leading the way in challenging the stigma surrounding opioid use, providing compassionate harm- reduction support to people navigating prescription drug use.

With a focus on education, collaboration, and lived experience, Paul Hemsil, has been empowering patients and healthcare professionals to approach opioid use with greater empathy and understanding.

At the heart of the POMS model is a **commitment to meeting people where they are, recognising the complex factors behind medication dependency and supporting people to make informed decisions about their health.** A key strength of the service lies in its ability to build trusting, non-judgmental relationships with patients. This has created safer spaces where people feel empowered to speak openly about their medication use and consider change at their own pace. Paul tells patients about his own experience with opiates, taking the shame out of asking for support.

One powerful example of the POMS service involved a 19-year-old woman who had been using high doses of opioids purchased online. **Through consistent, supportive conversations, she gained a deeper understanding of the risks associated with unregulated substances and the long-term effects of opioid use.** With guidance from Paul, she was supported through a gradual reduction plan that prioritised both her physical safety and emotional wellbeing - a testament to the value of trauma-informed, person-centred care.

The work of the POMS team is also influencing wider change in clinical practice. By engaging with local GPs and other professionals, the service has raised awareness of the risks of abrupt opioid withdrawal. In some instances, people were having prescriptions stopped suddenly without a tapering plan, leading to harmful outcomes. Paul challenged this approach and advocated for more considered, compassionate prescribing practices.

As a result, there has been a noticeable shift in attitudes. **Clinicians are increasingly open to conversations around harm reduction, and more patients are being referred into the service.** The ripple effect of his work is clear, both in the growing number of people seeking support, and in the gradual dismantling of the stigma that often surrounds prescription medication dependency.

The POMS service is not only helping people reduce their reliance on opioids—it is reshaping the culture around prescription drug use. By combining lived experience, clinical insight, and a commitment to compassionate care.





CASE STUDY:

REDUCING HARM, SAVING LIVES

The causes of serious harm and drug and alcohol deaths are multifaceted and complex relating to personal, social and environmental factors.

In 2022 we developed and published our **Drug Related Death Strategy** which we called 'Hope and Opportunity. The strategy outlined actions at Service, Organisational and Societal level to prevent deaths and serious harm.

Over the past two years we have delivered against those actions while further refining our approach to reducing harm and promoting hope and opportunities.

We remain focused on addressing the psychosocial drivers of harm.

Our psychosocial focus aligns perfectly with harm reduction initiatives. By bringing the two approaches together we strive to develop harm reduction initiatives that are relevant to people's lives and personal circumstances.

As we adapt to changing drug markets and the rise in substances contaminated with Nitazenes, and Xylazine, as well as the post-covid lockdown increase in alcohol related harms, we need to **ensure our staff and services are equipped to support people at increased risk and presenting need.**

OUR KEY AMBITIONS WITH THIS WORK ARE TO ENSURE:

- a) that people have relevant information around any changes to drug trends.
- b) we robustly review serious incidents and deaths in order to identify learning and take preventative action.
- c) that we share good practice across the organisation through Phoenix's serious review panel and reducing harm working group.
- d) we continue to ensure people have access to naloxone regardless of their selected drug, as we have seen the poisoning of other substances with synthetic opiates.

Following this review a refreshed action plan has been created for 2025 and 2026 which we are calling 'Reducing Harm' to reflect the better integration of targeted harm reduction into our approach.

KEY ACTIONS INCLUDE:

ORGANISATION LEVEL

- **Physical Health Harms;** Introduce smoking cessation and sustainable BBV testing into our support offer within Residential and Community provision. Within housing and prisons services to ensure staff are aware of how and when to sign post people.
- **Staff mental wellbeing** is considered through our incident review process following serious incidents/Overdoses and they are offered adequate support for their mental health.
- To **champion equity of access and capture the voices** of those not or underrepresented in treatment services of those not accessing treatment.



WORKING WITH OTHERS

- **Work and better communicate with partner agencies** to ensure that people moving from secure settings back into the community are supported to reduce the risk of drug related harm and death on release from secure settings.
- **Improve pathways** for those leaving prison into residential treatment.
- Continue to push for **access to residential rehab** for those who want it and can benefit, end postcode of access and replace inappropriate access process with trauma informed processes.



SOCIETAL LEVEL

- Developing the **Anti -Stigma Network (ASN)** – driving forward the ASN to end stigma and improve access to treatment.
- Continue to raise **awareness of Naloxone** and work with others to ensure that those most at risk have access to Naloxone.

Our Guiding Principle ensure that reducing harm and saving lives will remain a focus for us as an organisation.





CASE STUDY:

MULTIPLE NEEDS AND INTENSIVE SUPPORT AND ADVOCACY

Our Essex based Housing and Supported Tenancy Service (HoSTS) is a collaboration between Phoenix, Colchester Borough Homes and Essex County Council.

The service supports people experiencing multiple and overlapping needs who were previously placed in unsuitable housing with little to no appropriate support due to their needs being deemed 'too complex' or requiring specialist support.

The partnership **offers a secure home and a route to a sustained tenancy** by supporting people to navigate the housing system through early intervention and support to avoid the negative cycle of homelessness and to improve long-term outcomes.

- **All of our clients to date have had multiple diagnosed mental health conditions. All have experienced childhood trauma and 87% have experienced physical or sexual abuse.**
- **All of the women supported by HoSTS to date have experienced domestic abuse.**

Phoenix staff are located onsite which enables them to develop the trusting relationships that are crucial in helping clients maintain tenancies. Staff have a deep insight into how best to support clients and how to avoid and de-escalate high risk situations.

HoSTS is successful because of its collaborative approach, strong relationships have been developed with housing and policing partners. These relationships and others are vital to advocate for client to receive appropriate housing, benefits and wider system support.

When treatment and support systems are too fixed and inflexible to stretch to meet the needs of our HoSTS client, the intensive support offered by the HoSTS team is invaluable. They ensure no one is left behind or falls between the complex combination of threshold and access criteria of services they need. **Staff are empowered to challenge and advocate by developing a reputation that is based on trust.**



CASE STUDY:

TRUST AND INCLUSION

Enhanced Support and Access Team (ESAT). Improving Health Outcome and Reducing Inequality for Gypsy, Roma and Traveller Communities in Essex.

The Enhanced Support and Access Team (ESAT) is a new and innovative service delivered in partnership with Essex County Council, **designed to tackle long-standing health and social inequalities experienced by Gypsy, Roma and Traveller communities across the county.**

These communities often face significantly poorer health outcomes, with lower life expectancy and higher suicide rates than the general population. ESAT was created to respond directly to these disparities by **improving access to a wide range of services**, not only around drugs and alcohol, but also physical health, mental health, housing, education, and financial support.

However, deep-rooted stigma and historic exclusion from mainstream institutions have created widespread mistrust toward public services. **Many people within the Gypsy, Roma and Traveller communities have had little or no engagement with healthcare or social systems.** Some of those we now support have never visited a GP, do not possess formal identification, and left school at a very early age, if they attended at all.


From the outset, building trust was an essential and non-negotiable foundation for the service. Rather than assuming what people need, ESAT staff have focused on listening carefully, developing relationships, and tailoring support to each person's circumstances.

Phoenix have built long standing partnerships and a comprehensive local network throughout the years of service provision across the borough, grounding the approach for the EAST service in an extensive local knowledge, with staff who are deeply familiar with services and resources across the county.

Delivering a culturally sensitive service has involved listening and learning, working with people experiencing a variety of different support needs, often across generations.

Michael, a 47-year-old Irish Traveller. Before engaging with ESAT, he had never seen a GP, had no ID, and had no bank account. Through consistent support, he has now been registered with a GP, obtained his birth certificate and formal ID, opened a bank account, and is accessing financial and housing support. He is now cutting down on his alcohol use and working towards learning to read and write for the first time.

As more people start to engage, ESAT continues to demonstrate that trust, consistency, and listening are key to unlocking change in communities that have too often been left behind.



"I've been really happy with the support from ESAT. I wouldn't have known how to do any of this without my support workers help. She's helped me get my birth certificate, benefits, ID, my first bank account & is supporting me with housing. She has convinced me to see a GP & I have blood tests – I hate needles! She is taking me to classes for helping with alcohol and is going to teach me how to cook. I'm going to teach her to cook Coddle."

**– MICHAEL,
IRISH TRAVELLER, AGE 47**



THANK YOU

to everyone who uses our service and
support and our amazing staff, volunteers
and partners.

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