

North East Combined Authority

Economic Inactivity Trailblazer call for projects

Priority 2.5: support for women

The North East Economic Inactivity Trailblazer - Priority 2.5

1. About the North East Combined Authority

The North East Combined Authority covers the seven local authority areas of County Durham, Gateshead, Newcastle, North Tyneside, Northumberland, South Tyneside and Sunderland. The North East faces some deep-rooted challenges including skills, productivity and GVA which fall behind national averages, poor indicators of health, including healthy life expectancy, and some of the highest levels of economic inactivity across the country.

The North East Combined Authority has successfully secured funding to deliver the DWP Economic Inactivity Trailblazer, which is designed to:

- Align with DWP priorities on tackling economic inactivity
- Maximise the impact of existing local and national resources.
- Focus on groups facing the most significant barriers to employment.
- Be bold and ambitious in its design and delivery.
- Pilot new, integrated models of support
- Drive long-term system reform across sectors.

2. The Economic Inactivity Trailblazer

The DWP Economic Inactivity Trailblazer is a flagship initiative under the UK Government's wider strategy to reduce economic inactivity and support more people into work. Funded by DWP for the 2025/26 financial year, the programme is being piloted across eight areas in England through a one-year, test-and-learn model.

This place-based pilot is closely aligned with the ambitions of the Get Britain Working White Paper, aiming to bring together local health, skills, and employment systems to better support working-age residents who are economically inactive due to long-term health conditions, caring responsibilities, or other complex barriers.

In the North East, the Trailblazer will test innovative, locally tailored approaches to improve employment outcomes. It will strengthen collaboration between public health, employment support, and skills providers, and drive system change and unlock new ways of working.

The Trailblazer offers us the opportunity to develop and test new and innovative ways to address the persistent challenge of economic inactivity – with the aim of harnessing untapped human potential to help grow our economy, raise living standards, reduce child poverty and create opportunities from which everyone can benefit.

2.1 Trailblazer evidence base

In order to target this work on the areas of strongest opportunity and need we will be informed by our Interim Local Growth Plan – [Local Growth Plan](#) which outlines our target sectors; [North East Evidence Hub](#) and our forthcoming employment and skills strategy, A New Deal for North East Workers, which outlines target populations, currently excluded or under-represented in the labour market, and our future skills and employment needs.

The North East Combined Authority have undertaken a robust review of the evidence base to inform the development of the Trailblazer and this call for projects. Applicants should reflect on the evidence base and good practice and set out how they can be embedded into project delivery.

Applicants are not required to submit evidence for their application but are requested to develop proposals that develop and build on the existing evidence base to bring new learning and understanding to employment support in the North East.

2.2 The objectives of the Trailblazer

The North East Economic Inactivity Trailblazer is centered around three priority areas:

Priority one: Better pathways into employment

This priority will develop approaches to provide an enabling environment and resources to bring together, coordinate and maximise existing service provision to enhance the coherence and impact of existing and emerging employment support interventions.

This approach will bring together organisations delivering employment support services in their area and will shape and direct the local infrastructure to better support mainstream services. This will ensure that both residents and employers benefit from high quality, comprehensive and reliable employment support services, and remove barriers to improving the skills and employability journey.

Priority two: New ways of working

We will invest in new employment provision addressing identified needs, to move residents into employment, education or training, or closer to the labour market. This priority aims to stimulate innovation and explore new models of delivery, which provide learning and the opportunity for future scale-up. Priority two has six strands of activity:

- Supported placements for young people
- Supported placements for neurodiverse residents
- Support to individuals within primary care
- Support for social housing tenants
- Support for women

- Support for employers

In addition to the activity outlined above, the Combined Authority will also invest £950,000 in a VCSE Small Grant Programme, with grants available of up to £100,000 for community-based projects.

Priority three: Systems reform – an integrated approach to health and employment

We want to break down barriers and redesign processes to create best in-class services for residents across employment, skills and health. We will fund three strands of activity:

- System redesign
- Carers and VCSE capacity building
- Labour market intelligence (LMI) Hub

The remainder of this document sets out the details for priority 2.5 support for women. This should be read in conjunction with the guidance for this call for projects.

3. Support for women (priority 2.5)

Economically inactive women with long-term health conditions represent a significant and often overlooked group in the UK labour market. Their experiences are shaped by intersecting barriers that require holistic, trauma-informed, and gender-sensitive approaches to engagement and support.

These women are more likely to be affected by a combination of factors that limit their ability to access or sustain employment, including:

- Chronic physical or mental health conditions (e.g., anxiety, depression, musculoskeletal disorders, fatigue, gynaecological related conditions or menopause-related symptoms).
- Unpaid caring responsibilities, particularly among single mothers or carers of older or disabled relatives, which constrain availability for work or training.
- Low confidence and self-efficacy, as a result of social and structural barriers — especially after extended absences from the labour market.
- Stigma and discrimination, with added disadvantage for disabled women and those from ethnic minority backgrounds.
- Limited access to affordable, flexible childcare and reliable transport options.
- Histories of trauma or domestic abuse, which are more prevalent among women with long-term mental health needs.

Emerging evidence highlights the need for tailored strategies that address these complex and overlapping issues. Effective interventions should recognise the cumulative impact of health, gender, and socio-economic disadvantage and focus on building trust, confidence, and pathways that are flexible and person-centred.

The North East Combined Authority, through the Economically Inactive Trailblazer want to fund innovative, evidence-based approaches that provide holistic, flexible pathways into meaningful activity, training, and employment for economically inactive women in the North East Combined Authority area. We are also interested in piloting new approaches that will contribute to the evidence base.

Summary of priority 2.5:

- The target group is inclusive of 18 to 64-year-olds women who are economically inactive and have a health barrier to work.
- Priority 2.5 is expected to support 125 women in total.
- An indicative allocation of £925,000 is available for this priority.
- The Combined Authority expects to fund between 5 and 8 projects in this strand of activity.
- The minimum grant request is £100,000, and the maximum request is £175,000. Projects that apply for more or less funding will not be assessed. Partnership bids are welcomed.
- For this priority it is expected that projects may be local or hyper local. Projects covering the whole of the North East region are also welcomed.
- All delivery must be completed by 31 March 2026.

Aim of priority 2.5

The overarching aim of priority 2.5 is to increase engagement and improve employability outcomes for women who are economically inactive and living with one or more long-term health conditions.

Objectives of priority 2.5

Priority 2.5 seeks to:

- Increase engagement and sustained participation in employability support among economically inactive women.
- Improve health, wellbeing, and confidence, and lay the foundations for increased economic activity.
- Support meaningful progression into education, training, volunteering, or employment.
- Build local capacity to deliver gender- and trauma-informed, health-integrated employability support.
- Test and pilot innovative approaches to understand what works, for whom, and in what contexts.

A central principle of this work is **learning** and generating data, evidence and insight into effective practice to inform future project design, commissioning, and investment. This includes collecting and analysing data in order to better understand the needs of women across all demographics to shape future funding.

Key delivery considerations

Engaging women who are economically inactive due to health conditions requires a nuanced, person-centred approach. Funded projects should:

- Address the interrelated challenges women face, including poor health, caring responsibilities, low confidence, and long-term detachment from the labour market.
- Operate within accessible, community based settings that foster trust and prioritise relational practice.
- Provide integrated, wrap around support that reflects the pace and priorities of each individual.
- Facilitate progression through meaningful, flexible opportunities that reflect women's lived realities and ambitions.

Target group

Projects funded through priority 2.5 must focus on:

- Women aged 18 to 64 who are currently economically inactive and have a physical or mental health condition (either self-declared or clinically diagnosed).
- Women may also face additional barriers such as:
 - Caring responsibilities.
 - History of trauma or abuse.
 - Low qualifications or confidence.
 - Poverty, social isolation, or digital exclusion.

We welcome applications that support cisgender women, transgender women, and non-binary people who identify with womanhood in part or in full.

Key dates

- Applications must be received by **noon on 14 July**. Any application not fully completed and submitted by this date and time will not be assessed.
- Successful applicants will be expected to enter into contracts and mobilise projects in August 2025.
- The projects must be mobilised by **end of August** and ready to take referrals from 1 September 2025.
- All activity and spending must be complete, and outputs and outcomes achieved by the **31 March 2026**.

4. Eligible activities

There is evidence that gender-sensitive, trauma-informed project design is critical when supporting women who face complex barriers to employment, including experiences of trauma, poor mental health and/or mental illness, and domestic abuse. Supporting women's re-engagement with work requires addressing both structural inequalities and personal challenges.

We recognise a range of promising practices that are beginning to demonstrate impact in engaging economically inactive women. Through the Trailblazer, we are keen to **pilot, test, and learn** from innovative models that incorporate these approaches.

Projects may include, but are not limited to, the following features:

- Women-only spaces¹ or sessions that foster safety, trust, and a sense of belonging.
- Trauma-informed delivery that recognises the impact of abuse, adversity, and mental distress.
- Confidence-building and strengths-based approaches that promote self-efficacy, agency, and motivation.
- Peer support models offering solidarity, shared experience, and mutual encouragement.
- Holistic support addressing wider determinants of employability, such as health, housing, debt, childcare, and social isolation.
- Integrated or coordinated delivery, through partnerships or co-location, offering wraparound support.
- Flexible, low-pressure progression routes, including short courses, volunteering, and wellbeing-focused goals.
- Support tailored to caring responsibilities, such as:
 - On-site or subsidised childcare.
 - Family-friendly scheduling (e.g., school hours).
 - Remote or hybrid delivery with assisted digital options.
- Health-employability integration, including:
 - Co-located services (e.g., employment support in health settings).
 - Joint planning between employment and health professionals.
 - Inclusion of mental health or wellbeing practitioners in delivery teams.
- Delivery through trusted, community-based organisations, such as women's centres, grassroots VCSE groups, or local health networks.
- Outreach and engagement via community connectors or peer ambassadors, building trust and access through word-of-mouth.
- Culturally competent and accessible provision, particularly for migrant, refugee, and ethnic minority women, including interpretation and multilingual materials.

¹ Women-only spaces can be vital for recovery, peer support, and empowerment in some cases. Safety and consent are key considerations in designing services for women.

We believe that providers are the experts and understand the voices of women they support. Therefore, we invite innovative proposals for projects and invite providers to make suggestions that are trauma-informed, inclusive, including relating to specific under represented groups. If projects are for survivors of abuse, we expect providers to be clear on the safeguarding needs of the project.

Types of project activities

Projects should deliver **person-centred, gender- and trauma-informed support**, and may include activities such as:

Employability support tailored to women

- Confidence-building, motivation, and soft skills development.
- Pathways into volunteering, training, or flexible/part-time work.
- One-to-one coaching from a named advisor using a relational, strengths-based approach.
- Access to basic skills and qualifications (e.g., digital skills, literacy, pre-employment training).
- Women-only group sessions to build social networks and reduce isolation.
- Peer mentors or lived experience ambassadors.
- Support with transitions back into work, including managing income risk or health impacts.

Health and wellbeing integration

- On-site or referred access to:
 - Mental health services (e.g., talking therapies, trauma support).
 - Physical health management and condition-specific support.
 - Social prescribing, peer-led recovery, and wellbeing activities.
- Collaborative working with health professionals (e.g., perinatal mental health teams, chronic pain services).
- Holistic assessment and goal-setting that incorporates both employment and wellbeing outcomes.

Flexible and family-friendly delivery

- Sessions aligned with school hours and term times.
- Practical support with childcare and transport (e.g., crèche provision, travel subsidies).
- Remote or hybrid delivery options with digital inclusion support.

Please note that any therapeutic interventions should be delivered by appropriately qualified staff with relevant occupational expertise. This can be funded through the project and delivered by the provider directly, if appropriate, or via a partnership project.

5. Budget

There is a budget allocation of £925,000 for priority 2.5. The Combined Authority expects to invest in between 5 and 8 projects. Partnership projects are welcomed. All funding must be spent by 31 March 2026.

Eligible costs include:

- Provider staffing costs
- Training and development costs for participants
- Participant travel costs
- Provider overheads
- Costs for project level data collection, learning and evaluation

6. Eligible participants

Residents in the North East area will be eligible for support under this priority if they are:

- Economically inactive - excluding students
- Are resident within the north east area,
- Are aged between 18 and 24 inclusively
- Have the 'right to work' in the UK.

Eligible participants must meet the following **definition of economic inactivity**:

Economically inactive individuals are those not in work and not actively seeking work (unlike unemployed individuals who are actively seeking work).

Not all economically inactive individuals claim benefits. For those that do, this would include those claiming either "legacy" benefits or those within specific conditionality regimes in Universal Credit (UC). The former includes Employment Support Allowance (ESA), Incapacity Benefit (IB) and Income Support (IS). The latter includes claimants within the Preparation Requirement or Work Focused Interview Requirement conditionality regimes (or equivalent).

There is no minimum time period of economic inactivity.

7. Outputs and outcomes

All activities should contribute to the following outputs and outcomes:

Outputs:

The following outputs are expected from priority 2.5:

- 125 economically inactive women supported

- 115 women engaging with keyworker support services
- 100 women supported to develop skills (life skills, employment skills)
- 75 economically inactive women supported to engage in job searching
- 90 socially excluded women accessing support
- 100 women making progress towards or into the labour market.

We will require applicants to demonstrate how they intend to support women to progress towards the labour market, including progression into work, training or other support to address a specific need, and what tools will be used to monitor the individual's progress.

Outcomes

The following outcomes are expected from priority 2.5:

- 100 women with improved employability skills
- 20 women progressing into further education or training
- 15 women accessing permanent employment

8. Applications and assessment process

Applications

Providers should submit a completed application using the standard template. Each question has a word limit and any text over this word limit will not be assessed. Additional documents or appendices will not be assessed.

Applications from partnerships are welcomed, and the lead partner has responsibility for completing all required documentation.

Providers are expected to be able to demonstrate in their application:

- Experience in delivering employment programmes.
- The ability to mobilise and begin delivery by 1 September 2025.
- A commitment to Equality, Diversity, and Inclusion (EDI).
- Systems for safeguarding, risk management, and data protection.

All applications will be scored in line with the North East Combined Authority award criteria set out in the project application guidance document.

Assessment

The North East Combined Authority will hold an assessment panel with applicant interviews, if required, on 31st July 2025. Applicants are advised to hold this date in diaries, as alternatives will not be available.

9. Quarterly claims and payments

The North East Combined Authority's claim process operates quarterly in arrears with projects able to claim for actual expenditure on project activities, on a quarterly basis, after the money has been spent. Applicant organisations are required to cashflow project activity.

Claims are due one month following the quarter end. The North East Combined Authority will pay claims when:

- A fully completed claim form has been approved by the Combined Authority together with supporting information, including a detailed transaction list and evidence of defrayment
- Any project specific funding conditions have been complied with
- Financial, output, milestone, risk and progress information has been uploaded correctly onto the portal

The Combined Authority will withhold 10% of the project value until all necessary checks have been undertaken and the project can be satisfactorily closed.

10. Alignment with other projects

We expect that applications will demonstrate how they align with, and not duplicate, existing projects and programmes. This includes UKSPF People and Skills funded projects as well as other projects funded by the Economic Inactivity Trailblazer and Connect to Work.

Providers will be expected to attend quarterly provider forum meetings and engage with other Trailblazer activities, including integration and system change workstreams.

11. Monitoring, evaluation and learning

The monitoring information for each participant will be collected via the Participant Registration Form. It will be the responsibility of each provider to ensure every participant has completed this information.

Monitoring returns, along with claims, will be submitted on a quarterly basis, and sample checks will be completed by the Combined Authority.

The evaluation of the Trailblazer is vital to inform future direction. All participating organisations must commit to participating in the Combined Authority programme level evaluation by collecting and providing data, taking part in qualitative interviews, completing surveys and allowing their data to be processed and analysed for this purpose.

Providers have a critical role in data collection, learning and evaluation for the Trailblazer.

Collecting and analysing data will give the Combined Authority a better understand the needs of women across all demographics to shape future funding. Applicants are encouraged to include research, learning and evaluation in their applications. The Combined Authority is particularly interested in the following research questions:

Engagement with women:

- Who engaged with the project (e.g., age, ethnicity, caring status, health conditions)?
- What outreach approaches were most effective in building trust and reaching under-served groups (e.g. lone parents, minoritised women, survivors of trauma)?
- What were the reasons women gave for joining the project – and for staying engaged or disengaging?
- How did women describe their initial barriers to participating in employment or employability support?

Support and interventions:

- What aspects of the project did women find most supportive or enabling? (e.g., the gender-specific approach, health integration, peer support, flexible delivery, advisor relationships)
- How accessible and inclusive did the support feel for women with multiple barriers (e.g., trauma, language, disability, digital exclusion)?
- In what ways did participants report increased:
 - Confidence, self-worth, or motivation?
 - Understanding of their own strengths and aspirations?
 - Management of health or wellbeing in relation to work?
- What changes occurred in participants' lives (e.g., new routines, volunteering, training, paid work, improved mental health)?
- Were there gendered patterns in outcomes or challenges? For example, was progress slower or more complex due to caring roles, trauma, or poverty?
- What delivery models, tools, or partnerships were most effective for this group?
- How were health and employment support practically integrated and what helped or hindered this integration?
- What skills or support did staff need to deliver gender-informed, trauma-aware, health-integrated support?
- What elements of the project could be replicated, improved, or scaled?
- What were employers' views on employing economically inactive women? Were there any specific barriers? How could these barriers be tackled?

System level learning:

- How did this project connect with other services (e.g., NHS, DWP, childcare, housing)? And how did the project influence how local services work with women facing health and employment barriers?
- What structural issues limited or enabled progress for women?

- What would need to change at system or policy level to improve outcomes for this group?