



General election 2024:

No Mind Left Behind

mind Cymru

This election is a pivotal moment for mental health.

Every year, 1 in 4 of us will experience a mental health problem.¹ But right now, the mental health system is at breaking point and far too many of us aren't getting the help we desperately need.

The impacts of this broken system do not fall equally. People living in poverty, people from racialised communities and those most severely affected by mental illness are getting left behind; all too often not getting the help and support they need.

In the midst of a cost of living crisis, with poverty growing at its fastest rate in 30 years, it's not surprising that more of us are becoming unwell, unable to stay in work and are turning to the benefits system for support.² Mental health is now the leading cause of sickness absence in the UK. 300,000 people with long-term mental health problems fall out of work every year.

More of us might be talking about mental health than ever before, but support is still out of reach for so many. The good news is this is fixable. But, this growing demand for mental health support will not

go away on its own; it requires targeted action from both Welsh government and UK government.

We need a UK government that prioritises mental health to make sure that everyone gets the support they need, when they need it. This will require a truly cross-governmental approach, with government departments, civil society and those with lived experience working together to develop and deliver a new mission for mental health.

Our network of local Minds run a range of innovative mental health services ranging from counselling, befriending support and talking therapy through to benefits advice and employment and training schemes, giving us unprecedented insight and knowledge into what is needed to deliver the transformation needed for people with mental health problems.

The recommendations we set out are the immediate steps the next UK government must take towards a future where there's no mind left behind.

Mind Cymru is calling on the next UK government to:

- 1** Reform the Mental Health Act
- 2** Fix benefits assessments for disabled people
- 3** Support people with mental health problems to thrive at work

Together we can make sure there's no mind left behind.

The Case for Change

Mental health should be at the heart of this election. We are in the midst of a mental health crisis, with the number of those needing support continuing to rise and the scale of demand outstripping the current system's capacity to supply it.

In Wales, most aspects of mental health are devolved to the Welsh government. However, Westminster still holds key powers that impact the state of mental health in Wales, such as levers around reducing poverty or reforming two-nation legislation.

A key example is the proposed reforms to the Mental Health Act (1983), a piece of legislation that covers England and Wales.

We want to see the next UK government deliver the new bill to parliament within the first 100 days of taking power. This will enable the Welsh government and key stakeholders in Wales to improve how the Act is used here.

Although great strides have been made in increasing awareness of mental health, worryingly, stigmatising attitudes are on the rise. This is particularly the case for those of us with more severe mental health problems. And over half of the UK population believes there's still a significant amount of shame associated with mental health conditions.³

Reform the Mental Health Act: The Case for Change

The Mental Health Act is outdated. It's not fit for purpose. Mind has been pushing for reform to the Act for many years. And we can't wait any longer.

Here are just some of the problems with the Act:

- **People detained under the Act don't have enough say in their treatment.** They aren't able to choose the treatment that works for them, and the Act doesn't offer a way to appeal decisions.
- **There are shocking racial disparities in how it's used.** Black people are over 3 and a half times more likely to be detained under the Act than white people. They're more than 8 times more likely to be subject to a community treatment order.⁴
- **Community treatment orders don't work.** Community treatment orders are meant to give people supervised treatment in the community. They give someone a set of conditions they have to follow when they're discharged from hospital. They were introduced to stop people repeatedly going back into hospital. But they don't work. They don't reduce the number of readmissions. They don't reduce the amount of time people spend in hospital. They're intrusive and restrict people's lives. And people don't know what they have to do to get off the order.
- **It's unfair on people in deprived areas.** People living in deprived areas are also more than 3 and a half times more likely to be detained than those in the least deprived areas.⁵
- **It doesn't work for young people.** Young people are inappropriately put in adult wards and far from home. This is unacceptable. They're restrained, ignored and left to deal with a confusing system on their own. And when they get back to their communities, support they were promised often never materialises.

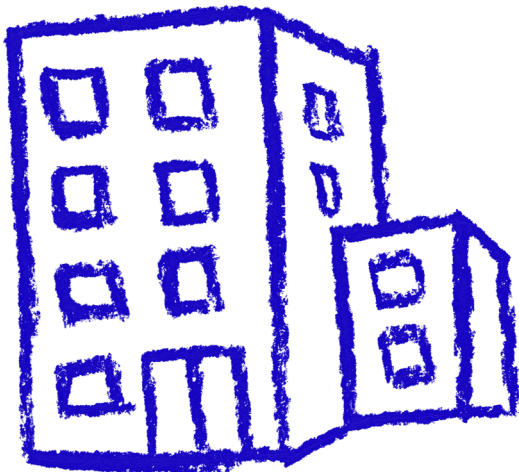


1

Bring forward reform of the Mental Health Act

The road to reform began in 2018 with the independent review of the Act, followed by a White Paper in 2021, and a draft Mental Health Bill has since been developed and undergone pre-legislative scrutiny. Many people with mental health problems have shared the difficulties and trauma they have experienced under the current Act. All of this will now have come to nothing.

The vast amounts of time, effort and resource that have gone into reforming this legislation to make it fit for purpose in the 21st century must not be discarded. The party or parties forming the next government should respond to the Joint Committee's report on the draft mental health bill and introduce the bill to parliament within the first 100 days of their time in office.



What the next UK government should do:

The next UK government must deliver a reformed Mental Health Act to strengthen people's rights, choice, and control while they are in a mental health hospital. The bill should be **introduced to parliament within the first 100 days of the next government**. In this new mental health bill, we call for the following changes, in addition to what has been proposed:

- Community treatment orders to be abolished.
- People to have a right to mental health assessment and treatment when they need it.
- Advance choice documents for everyone in a mental health hospital and a right to appeal treatment decisions.
- Everyone in a mental health hospital to automatically get an advocate unless they don't want one.
- Children and young people to be equally protected under the new rights and safeguards, and an end to inappropriate placements of young people on adult wards or far from home.

“I have never felt more unsafe than I did in that place [...] Staff were pulled in so many different directions at once and it was clear that there just weren't enough of them. [...] My time at hospital is something I've sought support for in therapy since leaving – it was that bad. Acute inpatient services should be a refuge, not a source of added trauma.”

Priya, young person

Impact

Reforming the Mental Health Act is crucial to strengthening people's rights, choice, and control while they are in a mental health hospital. It is an opportunity to address the deep inequalities in the application of the Act, and to give people greater say over their own treatment.

Poverty and mental health: the case for change

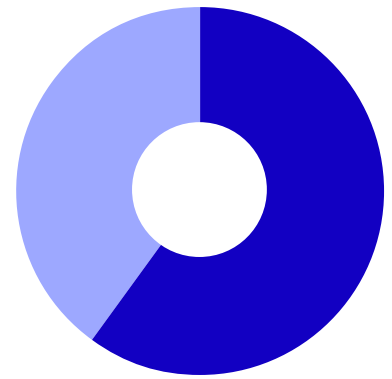
We know there's a 2-way link between poverty and mental health. People with mental health problems are more likely to struggle financially, and people facing financial difficulties are more likely to struggle with their mental health.

The current cost-of-living crisis is taking a huge toll, leading to more people experiencing mental health problems and worsening the situation for those who were already struggling.

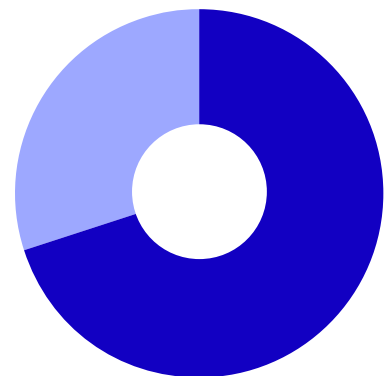
- Our research shows that people receiving benefits have been hit particularly hard and are experiencing increasingly severe and complex problems post pandemic.⁷
- Approximately 1 in 3 people applying for and receiving PIP and 1 in 2 people receiving ESA have a mental health problem, cognitive impairment or learning disability as their main disability.^{8,9}

“I am a human being who is struggling, not just a National Insurance number, or a form that’s being processed. Decision makers should have experience of mental health and be able to be empathetic and understanding.”

Paul



6 in 10 (59%) UK adults say that the **cost-of-living crisis has had a negative impact on their mental health**, such as leaving them feeling anxious, depressed, or hopeless.⁶



Almost **7 in 10 people (66%)** said that going through their **benefits assessment made their mental health worse**.¹⁰

2

Make benefits assessments work for people with mental health problems

The current benefits system doesn't give those of us with mental health problems the financial support we need. Inaccurate health assessments are leaving many people having to go through lengthy, stressful processes to fight for benefits to which they are eligible, while they are unwell.

The Personal Independence Payment (PIP) assessment and Work Capability Assessment (WCA) used by the Department for Work and Pensions (DWP) are in desperate need of reform. There is a lack of expertise and understanding of mental health problems within the benefits system, which means assessments ultimately cause harm to many people's financial situation and mental health. People with experience of the benefits system must also be at the heart of planning how to improve it.

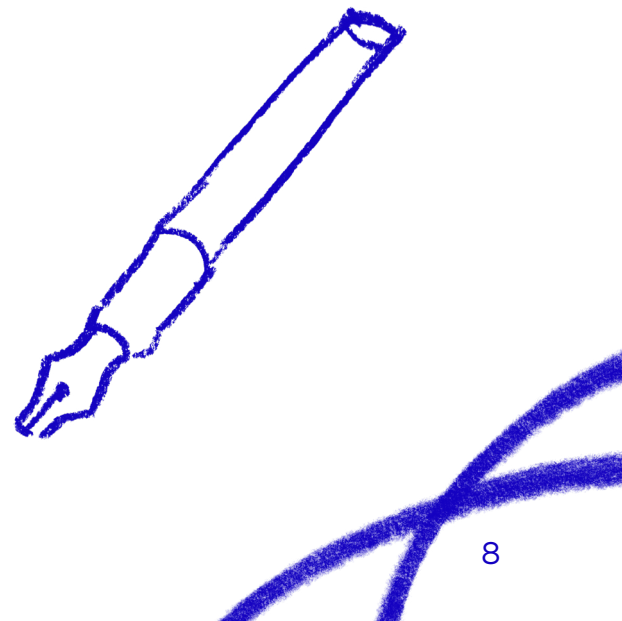
The benefits system should be there for all of us when we need it most. Recent proposed reforms have sought to reduce access and make the system harder for disabled people. Instead, a fresh approach is needed, which prioritises getting disabled people, including people with mental health problems, the support they need.

There is little evidence that sanctions work to help people with mental health problems into the workplace, but plenty of evidence that they are harmful to our health. For the benefits system to work for people with mental health problems, it has to be built on understanding and empathy. Personalised support should be delivered by skilled and experienced staff, with the

aim of supporting people to fulfil their individual aspirations, rather than simply pressuring them to comply.

We are calling on all political parties to commit to:

- **Stop applying conditionality and sanctions** to disabled people and people with long-term health conditions
- Create a **new commission led by disabled people to redesign benefits assessments**. A commission should be tasked with:
 - Identifying reforms to the structure and criteria of benefits assessments.
 - Coming up with new criteria for the PIP assessment which better reflect how a person's health condition or disability affect them.
 - Looking at whether removing the WCA is the right decision, and if so, how it can work safely.



Impact

Reforming benefits assessments to make sure they're fair, accurate and appropriate for people with mental health problems will help people live with independence and dignity when they're too unwell to work.

And redesigning assessments and ending conditionality will reduce the negative impacts of the current system, and help support people's recovery and ability to return to work when they are ready.

Mental health at work: the case for change

Mental health is the leading cause of sickness absence in the UK. 300,000 people with long-term mental health problems fall out of work every year. We know that in particular small business owners and the self-employed are suffering, **with 1 in 2 reporting poor mental health**.¹¹ Those in low paid and insecure work, experiencing in-work poverty, have also been particularly affected.

Work can be good for people's mental health. Our research backs this up with people telling us they wished they were well enough to work but they struggled to find employment which gave them the flexibility to manage their mental health problems and contribute in a meaningful way.¹²

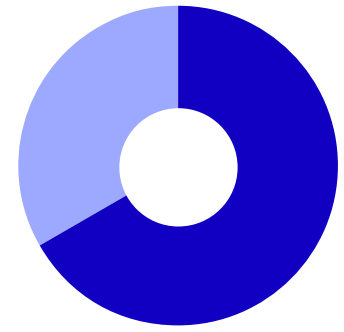
The Thriving at Work Review, commissioned by the then government in 2017, highlighted 300,000 people leave work each year due to long term mental health conditions.¹³ The Review proposed a set of standards that employers of all sizes and sectors should look to implement to allow everyone to get the support they need at work. These were brought together under the Mental Health at Work Commitment. But progress from the UK government has stalled and we're yet to see a full implementation of the recommendations made in the Review.

The rights of people with mental health problems are also currently unclear within the Equality Act 2010, due to the requirement for a disability to be "long-term". Mental health problems can fluctuate and be episodic and it is essential that legal protections reflect this.

And the current model of Statutory Sick Pay (SSP) means many people who are not fit to work can't afford to take the necessary time off sick. Evidence shows this has negative impacts on someone's health and recovery.¹⁴

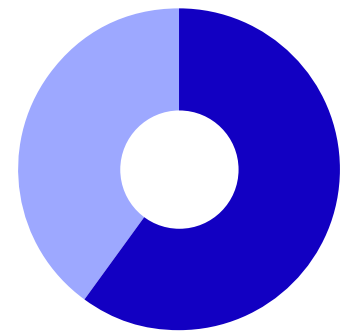
“I have health conditions so really struggle to work, but I can't afford to take time off. My employer doesn't like me using annual leave to cover sickness. I'm struggling to survive as a single parent with one income, but I physically can't do more work due to health.”

Respondent in Mind survey 2020

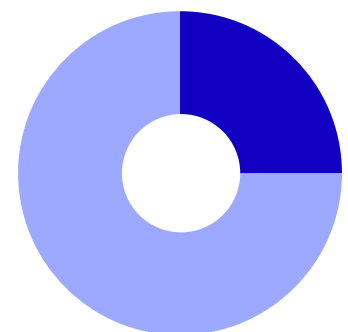


2 in 3 people on SSP due to their mental health told us that **SSP has caused financial problems and for some this meant going into debt.**

For people with mental health problems on SSP:



3 in 5 people told us that the reduction in income caused by SSP had a **negative effect on their mental health.**



1 in 4 said it's slowed down their recovery.¹⁵

3

Support people with mental health problems to thrive at work

Employers need to step up to the challenge of improving workplace wellbeing for all and supporting people with mental health problems. But with 68% of people thinking the government should enforce standards for how employers deal with mental health at work,¹⁶ we also need to see action from the UK government.

By implementing the Thriving at Work recommendations in full and promoting the Mental Health at Work Commitment, the government can offer a framework for business to create workplaces that promote good mental health. In particular, they could provide a focussed package of funding, support and information to support SMEs and micro-organisations to implement the Mental Health at Work commitment.

The UK government should also clarify and extend the protections available to workers under the Equality Act 2010 so that people with mental health problems get the same rights as other disabled people.

And with workers on Statutory Sick Pay (SSP) getting as little as £1.10 an hour in the first week and less than £3 an hour after, SSP is in desperate need of modernisation.¹⁷ People on low incomes or the self-employed aren't eligible for Statutory Sick Pay (SSP)¹ and while many people returning to work after an absence due to mental health find it easier to manage the transition through a phased return, SSP in its current form isn't flexible enough to accommodate this.

What the next UK government should do

- **Modernise SSP so that it is:**
 - **A true financial support**, increased in line with the Living Wage, payable from the first day of sickness and available for 52 weeks.
 - **More flexible** to better allow voluntary phased returns while receiving wages and on a pro-rata basis.
 - **Available to people on low incomes** who aren't eligible right now, delivered by abolishing the Lower Earnings Limit.
- **Implement the recommendation of the 2017 Thriving at Work Review** so people are supported to look after their mental health at work.
- **Amend the Equality Act 2010 to clarify the definition of disability** to better reflect the experiences of people with mental health problems.



¹ SSP is payable to all 'employees' (defined as workers paying Class 1 National Insurance Contributions (NICs)) who earn above the Lower Earning Limit of £123 per week (on average). An estimated 2 million workers earn below this Lower Earnings Limit and are therefore not eligible for SSP or any financial support from their employer. The self-employed who do not pay class 1 NICs are also excluded.

Impact

The estimated cost of poor mental health to UK employers is at a record high of around £56 billion a year. This is down to sickness absence, presenteeism, and increased staff turnover – up by about 25% since 2019.¹⁸ By ensuring everyone has the support they need to thrive at work, the UK government can help grow the economy and reduce pressure on NHS mental health services.

No Mind Left Behind: Our call to action

The crisis in mental health cannot continue. That's why it's critical that the next UK government ensures we're a country where everybody with a mental health problem gets the support they need, when they need it.

This is a big task – but we know the steps we need to take to make this happen. And with these steps, the next UK government has a chance to get support for people with a mental health problem back on track. And long-term, they can drive the transformation needed within our mental health system.

Mind stands ready to work with the next UK government to make this happen – the delivery of mental health services across **our network of local Minds** gives us unprecedented knowledge and understanding of what works in mental health.

Together we can make sure there's no mind left behind.



¹ McManus, S., Meltzer, H., Brugha, T. S., Bebbington, P. E., & Jenkins, R. *Adult psychiatric morbidity in England, 2007: results of a household survey*, (2009).

² Department for Work and Pensions (March 2024) <https://www.gov.uk/government/statistics/households-below-average-income-for-financial-years-ending-1995-to-2023/households-below-average-income-an-analysis-of-the-uk-income-distribution-fye-1995-to-fye-2023>.

³ Mind polling, 'If it's okay' campaign, 2024.

⁴ NHS England Digital, *Mental Health Act Statistics, Annual Figures, 2022-23* (2024). <https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-act-statistics-annual-figures/2022-23-annual-figures/detentions-differences-between-groups-of-people>.

⁵ Ibid.

⁶ Mind, *Coronavirus: the consequences for mental health* (2021). Available at <https://www.mind.org.uk/media/8962/the-consequences-of-coronavirus-for-mental-health-final-report.pdf>.

⁷ Department for Work and Pensions (2023). Stat-Xplore: PIP Cases with Entitlement. Available at: <https://stat-xplore.dwp.gov.uk/>.

⁸ Department for Work and Pensions (2023). Stat-Xplore: ESA Medical condition by Quarter and Employment and Support Allowance Caseload. Available at: <https://stat-xplore.dwp.gov.uk/>.

⁹ YouGov polling for Mind in 2022 (Money and Mental Health Policy Institute (9 May 2022) Press release <https://www.moneyandmentalhealth.org/press-release/cost-of-living-crisis/>).

¹⁰ Survey conducted by Mind and Census-wide of over 1000 people with experience of mental health problems and benefits assessment, 2023.

¹¹ Home – Mental Health At Work: <https://www.mentalhealthatwork.org.uk/>

¹² Mind, *Reassessing Assessments* (2023). Available at: www.mind.org.uk/media/sjbptudq/reassessing-assessments-report.pdf

¹³ Department for Work and Pensions and Department of Health and Social Care, *Thriving at Work Review* (2017). Available at: <https://assets.publishing.service.gov.uk/media/5a82180e40f0b6230269acdb/thriving-at-work-stevenson-farmer-review.pdf>.

¹⁴ <https://wpieconomics.com/publications/ssp-reform/>.

¹⁵ Mind survey (2020). 1,744 participants with mental health problems about their experiences with SSP. See: <https://www.mind.org.uk/media/2p1cuvpw/mind-ssp-briefing-oct-2022.pdf>.

¹⁶ More in Common polling (2024) Data tables available: <https://www.moreincommon.org.uk/our-work/polling-tables/>.

¹⁷ <https://wpieconomics.com/site/wp-content/uploads/2023/07/01.-WPI-Economics-Making-SSP-Work-FINAL.pdf>.

¹⁸ <https://www.deloitte.com/uk/en/services/consulting/analysis/mental-health-and-employers-the-case-for-investment.html>.



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