

Introduction

As a long-established organisation working across Wales, and across multiple sectors, to support and empower people with the most complex of needs, Adferiad believes in providing the quickest and easiest route to recovery.

"Unaided, people cannot be expected to cope with the bewildering maze of authorities which impinge upon their lives, and none appearing to be in touch with the others. The scandalous fragmentation of responsibility between local authorities and the health service should be ended. A unified national policy is needed."

ou could be forgiven for thinking these words were written today; in fact, they are taken from a letter written by John Pringle, published in The Times over 55 years ago in May 1970, about his experiences of caring for his son who had been diagnosed with schizophrenia.

Shortly after the letter was published, John Pringle formed the National Schizophrenia Fellowship, later to become Adferiad in Wales. 55 years on and the problem of service fragmentation remains; from the lack of integration between mental health and substance use services, to the perennial debate on how to deal with the social care crisis, the system is dysfunctional.

This is where we begin our calls to action for the next Welsh Government; before any grand ambitions of unified social care, integrate the services that are accessed by those with the most complex of needs, those who find navigating any system the most difficult of challenges, without having to understand why they must do it in a particular order.

Integrated support should also be delivered on an open access, sameday basis. Provide self-referred support when and where needed, reducing the barriers to help by using technology and existing third sector networks to overcome geographic problems and healthcare gatekeeping.

To achieve this, the next Welsh Government needs to commit to longterm funding, workforce development and pay equity across sectors, as well as a strengthened legislative framework.

A key component to improved access and quality of support is the need to co-ordinate and plan care and treatment. All too often, such planning is inconsistent, incomplete and inadequate.

Finally, the next Welsh Government must prioritise the mental health of the people of Wales; be that those with poor mental wellbeing, serious mental illness, addictions and substance use issues, or those who provide unpaid care.

These priorities offer the next Welsh Government a set of actions that, if delivered, will move our country towards hope, healing and a fairer future.

5 Priorities for the Next Welsh Government

















Integrate Mental Health and Substance Use Services

Why?

Too many people with more than one need are advised that one must be treated before the other, forcing them to navigate two different systems. This results in duplication, delays, and preventable crises. We require co-occurring services for co-occurring needs.

The current picture:

- In 2023 2024, almost three-quarters (72%) of adults starting treatment for substance use needs said they had a mental health treatment need.
- With mental health and substance use services working separately, individuals are left without joined-up care or appropriately trained staff to support both needs together².
- A 2018 national review in Wales found people "bounced around" between mental health and substance use services, and experienced long waits for detox, rehab and counselling services³.

Adferiad



- Services that work together for people experiencing more than one need at the same time
- A simplified and streamlined pathway in services that eliminates confusion, duplication and barriers
 - A community hub approach, with multi-disciplinary teams, that provides 'no wrong door' access to ensure no one is ever turned away



¹ Adult substance misuse treatment statistics 2023 to 2024: report (GOV.UK)

People with substance use and mental health disorders suffering harm and premature death after being excluded from care, warns RCPsych

³ Review of Substance Misuse Services in Wales



Deliver Same-Day, Open-Access Support

Why?

Help must be offered immediately when someone asks for it, and should be needs-led and personcentred. Early access saves lives, lowers hospital admissions, and prevents escalation. Services must be self-referred, and accessible when and where they are needed.

The current picture:

- Some progress has been made such as the national rollout of the 111 press 2 helpline in December 2022. This service has transformed access to support for urgent mental health⁴, but feedback suggests delivery is inconsistent across Wales.
- In June 2025, 16.8% of people trying to access Local Primary Mental Health Support Services had more than a 28-day wait between their initial assessment and start of therapeutic intervention⁵.
- We strongly welcome Welsh Government's commitment to "reduce waiting times for services, eradicating long waits, and setting waiting time standards that are clinically meaningful."
- 4 More than 200,000 calls to urgent mental health service | GOV.WALES
- 5 Waiting times for a therapeutic intervention, by LHB, age and month
- 6 Mental health and wellbeing strategy 2025 to 2035

We call for:

- Open access, same day, self-referred support when and where needed, in every part of Wales
- Direct, straightforward action to reduce waiting times, because delays in care are costing lives
- The use of technology and existing community networks to overcome geographic problems and improve access to healthcare
- Investment in prevention and adopting a preventionfirst approach for children and young people
- Action on diversity and anti-racism to address inequalities in access
 - Communication in plain language, fewer technical terms, and increased service awareness







Commit to Long-Term Funding for Health and Social Care

Why?

Target-driven, short-term funding weakens services, interferes with workforce development, and delays the recovery journey. Employees need secure, fair work, and people need consistent, reliable support.

The current picture:

- The NHS Confederation Mental Health Network (2023) warned that "short term funding can be harmful and creates uncertainty for providers, and it's especially difficult for voluntary sector organisations to survive on this type of arrangement."
- The 2023 Welsh Government report highlights that "issues relating to recruitment, retention and training gaps in the mental health and wider workforce pre-date the pandemic but have worsened as a result of burnout and rising costs of living."
- From the Strategic Mental Health Workforce Plan: "The third sector is playing an increasingly critical role in multi sector delivery models, but this is not fully recognised or quantified in planning and partnership working", and "[a] consistent approach to the development of the support workforce and third sector, across health and social care is key to delivering integrated and flexible models of care."

We call for:

- Further investment into workforce development, fair wages, and more staff to meet demand
- Direct, sustainable funding for health, social care, and the third sector reflecting their interdependence
- Recognition of the third sector as an equal partner at the table when decisions about health and social care are made
- A change from target-driven contracts to funding based on long-term results, which acknowledges recovery as a journey
 - Investment in anti-stigma programmes that promote positive views of mental illness, change perceptions, and encourage recovery





⁷ NHS Confederation responds to the Centre for Mental Health's report on the Better Mental Health Fund's impact in disadvantaged communities

⁸ Connecting the dots: tackling mental health inequalities in Wales

^{9 &}lt;u>HEIW Strategic Mental Health Workforce Plan</u>



Deliver a Wales Mental Health Act

Why?

Mental health deserves equality with physical health and should be viewed as a central component in people's lives, particularly for people with complex needs and severe mental illness. People affected by the current measures are often unsure of their rights because of the fragmented and dated nature of the legislative framework.

The current picture:

- Detention and compulsory admission powers are governed by the Mental Health Act 1983, which is non-devolved and applies to both England and Wales. Wales cannot unilaterally alter these powers through its devolved legislature.
- An Independent Review of the Mental Health Act (England & Wales, 2018) found the 1983 Act outdated and paternalistic. It recommended stronger patient rights and reducing unnecessary detention, especially for minority groups¹⁰.
- Two Senedd committees (Health and Social Care, and Legislation, Justice and Constitution) have raised concerns about the use of a UK Bill to introduce changes to detention and compulsory admission in Wales, which allows limited opportunities for Senedd Members to scrutinise provisions¹¹.

11 Reforming the Mental Health Act 1983: What it means for Wales

We call for:

- A commitment to review and strengthen the legislative framework so that mental health and substance use laws have parity
- Mental health and substance use to be seen as a public health priority, not a criminal justice issue
 - Existing legislation to be brought together to ensure laws are unified, people's rights are clear, and the least restrictive safeguards are used





¹⁰ Modernising the Mental Health Act – final report from the independent review - GOV.UK



Develop Care and Treatment Planning Coordination

Why?

Though they are essential tools, Care and Treatment Plans are frequently inconsistent, poorly coordinated, and do not take the lived experience and views of carers into account. Independent coordination can guarantee that they fulfil their purpose.

The current picture:

- 20.8% of patients across Wales who are currently in receipt of secondary mental health services do not have a valid Care and Treatment Plan¹², despite being a legal requirement under the Mental Health (Wales) Measure 2010.
- According to a 2019 survey, 52% of respondents were not given a copy of their care plan. 60% of respondents reported having no formal reviews or meetings to discuss whether their care plan was working. In addition, 51% of respondents did not feel involved in discussions and decisions made about their care plan¹³.
- The same survey found that only half (50%) of family members or carers looking after someone with a mental health problem said they felt valued in their caring role. According to Carers UK, unpaid carers save the NHS in Wales over £10 billion every year¹⁴.



We call for:

A "Tell Us Once" approach and improved data sharing to prevent duplication and delay

Care and Treatment Planning coordinators who are

independent and based in third sector organisations



Involvement of unpaid carers in the care and treatment planning of the people they care for, with recognition of the unique challenges faced by carers



Genuine collaboration with unpaid carers and those with lived experience to the develop appropriate policies and services



Recognition of care and treatment planning as an opportunity for early identification of carers, ensuring they are connected with appropriate support





¹² Care and treatment plan (CTP) compliance, by LHB, service, age and month

¹³ Joint Thematic Review of Community Mental Health Teams

¹⁴ The impact of caring on: Carers' health and wellbeing, and support with caring

Tuag at Dyfodol Tecach

Towards

Future

The Case for Change

Everyone faces mental health issues at some point in their lives. At the heart of our priorities are people; individuals, families and carers who far too frequently get lost in the system.

By integrating mental health throughout the government, we can eliminate preventable crises, provide earlier support, and develop services that reflect lived experience. Paired with reliable decision-making that considers the impact on mental wellbeing, clear leadership, and adequate funding, we can reshape the system around prevention, access, and fairness.

Better results, shorter waiting times, and a society that genuinely values inclusion and recovery are all benefits to be expected if these priorities are implemented. It is time to prioritise the mental health of the nation.

Why these priorities?

As a national voice, rooted in local communities, Adferiad is led by the voices of **lived experience**. It was therefore vital that our priorities were shaped by the opinions and challenges of those we support, as well as our staff, many of whom are on their own recovery journey.

To capture these thoughts, a questionnaire was circulated during the summer of 2025, distributed throughout our services across Wales. The questionnaire gave stakeholders a opportunity to discuss the challenges they face every day. We heard about challenges with life, barriers to accessing support, and struggles with the system; from healthcare, to funding and welfare benefits.

These opinions were collated and used to inform our priorities, and will continue to be at the heart of what we campaign for into the next Welsh Government and beyond.

About Adferiad

Adferiad enables positive transformation for individuals facing complex health challenges and difficult social conditions – those often overlooked and unheard – through a range of recovery-focussed services, campaigns, and the dedicated support of skilled staff and volunteers.

Adferiad, from its origins some 50 years ago, has delivered on its mission to provide information, support, and assistance to both individuals dependent on alcohol and other substances, with mental health needs, and serious mental illness, and their families and carers.

As a charity and company limited by guarantee, its mission is based on a combination of the energy, ambition, and vision of all the organisations that are now part of Adferiad, the hopes and wishes of those we support, and the imperative to continually improve.

Some of the key organisations that joined together to become Adferiad included: CAIS, Crossroads Mid and West Wales (itself having been formed from Crossroads charities in Brecknock and Radnor, Ceredigion, Montgomeryshire, and Pembrokeshire), Diverse Excellence Cymru, Hafal (formerly the National Schizophrenia Fellowship Cymru), CJIW, Jigsaw, and WCADA.

Adferiad's mission now includes an absolute commitment to being a Rights Affirming Organisation, and with the recent merger of Adferiad and Diverse Excellence Cymru, its ambition is supported further in engaging with all people who need or may need its support.

It may seem, at first glance, that Adferiad provide a more broad and diverse range of services than many other organisations. But this is a result of our pledge to care for the whole person. For example, someone may have a mental health problem, and an addiction, and be homeless. If we were not set up to cope with complex and/or co-occurring needs many of our beneficiaries would risk being lost in the gaps.

We work with people, not conditions or diagnoses. We do not restrict who can seek support from us: for us it's about the person as a whole, not identifying a "hole" in the person.

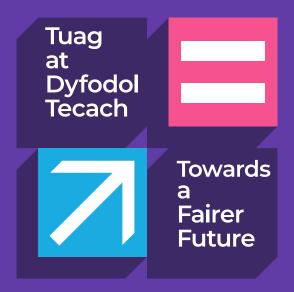
Adferiad is led by the people it supports. Our Members ensure that we act always in the best interests of our beneficiaries.

Adferiad provides outstanding services for people with mental health problems, serious mental illness, substance use and other addictions, and those with co-occurring and complex needs.

Adferiad campaigns with and on behalf of the people who use its services, their families, carers, and friends, and for those who need its voice as they are not receiving the services they need.









www.adferiad.org

Adferiad Recovery is a registered charity and company limited by guarantee