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PLATFFORM

For mental health and social change

**PLATFFORM  
MANIFESTO FOR  
CHANGE**

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## THIS IS PLATFFORM'S MANIFESTO FOR CHANGE.

WE HAVE A BIG VISION. IT'S AMBITIOUS, BUT ACHIEVABLE.

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To improve our mental health as a society, we need to look at the wider determinants of our physical and mental health and tackle the root causes of mental health difficulties at a community and population level. This will be good for all of us.

People in the poorest parts of the UK are living in a constant state of crisis, struggling on incomes that don't cover the bills, living in damp and dilapidated homes, having to raise children in poor circumstances, and dying younger. This constant worry puts a strain on mental and physical health and the result is that people in more adversely affected communities experience a level of trauma and distress far higher than the rest of the population.

Our public systems, intended to help people when they are facing the toughest times, are no longer fit for purpose. They need redesigning so they work better for everyone. Often, we are told that our mental health is the result of our biology or a chemical imbalance, or it is downplayed as "something we all struggle with at times". But we don't all face the same struggles, and we don't all have the same experiences of trauma.

For us to think differently about our public systems, we need a new conversation about mental health. We need to look at the root causes of distress and how we can create the systems and communities where we can all thrive.

In this manifesto, we explore what this means in practice. Wales already has strong foundations, but we need to think about systems, and how we can build on those foundations further to support our vision of a healthy and trauma-informed society.

This manifesto is much more than just policy asks, although there are some of those too. It's about all of us. It's about how we act as citizens, friends, and neighbours. For those of us working in 'helping' systems, it's about how we think about and act in those systems, both as colleagues and as people offering support. This impacts the multiple systems we are all part of, not just those related to mental health. It involves education, health, policing, social care, environment, community, leisure, arts, sport, and beyond.



**Ewan Hilton,**  
CEO, **Platform**



**Ubongabasi Obot,**  
Chair of Trustees, **Platform**

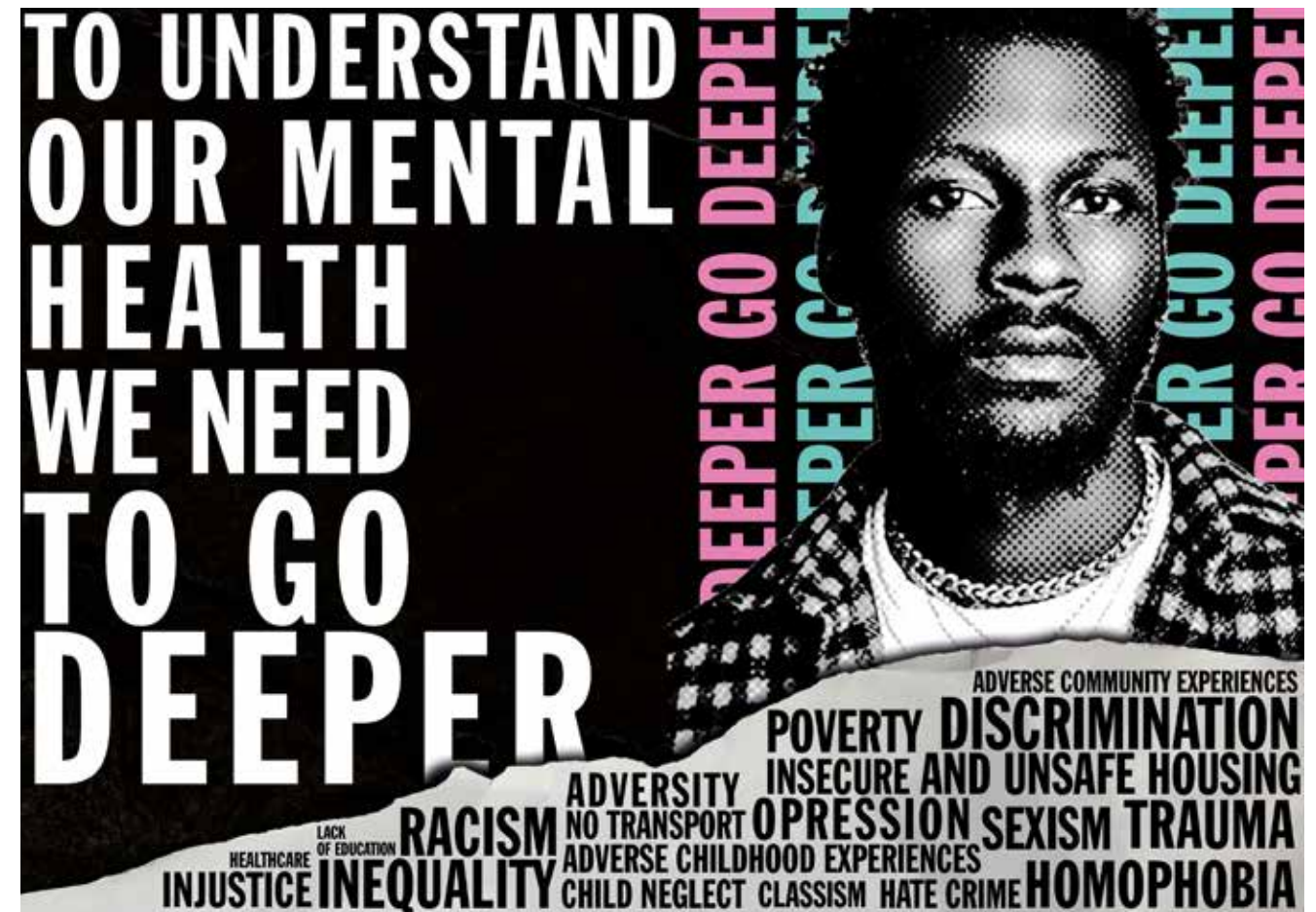
IT'S ABOUT LEADERSHIP,  
CULTURE, AND VALUES.

IT'S ABOUT CHALLENGING OUR  
CURRENT POWER STRUCTURES.

IT'S ABOUT RELATIONSHIPS, AND  
HOW WE SHARE POWER AND TREAT  
EACH OTHER.

IT'S ABOUT SEEING OURSELVES  
AS SYSTEM THINKERS AND  
SYSTEM MAKERS.

IT'S ABOUT UNDERSTANDING THAT  
CHANGE IS POSSIBLE AND ACHIEVABLE  
AS WE WORK TO BUILD A FAIRER AND  
MORE JUST WORLD, TOGETHER.



# 1: PLATFORM FOR MENTAL HEALTH AND SOCIAL CHANGE

Platform was born in 2019 from Gofal, a mental health charity established in Wales in the late 1980s. Through decades of working across housing and mental health, we gained real insight into the reality of mental health in society, the impact of trauma, and the causes of distress. That work led us to change our focus and become Platform, the charity for mental health and social change.

## TODAY WE WORK WITH OVER 9,000 PEOPLE A YEAR. WE SUPPORT PEOPLE OF ALL AGES, ACROSS URBAN AND RURAL COMMUNITIES, IN PEOPLE'S HOMES AND ALONGSIDE OTHER SERVICES.

Our work spans inpatient settings, crisis services, community wellbeing, supported housing and homelessness, businesses, employment, counselling, schools and youth centres.

Every single person we work with has their own unique story, but there are enough similarities and repetitions for us to see patterns emerging. After seeing thousands of people experiencing similar challenges, we know things have to change.

Our purpose is to change the narrative around mental health and make our public systems work better for people facing the toughest times.

Many other events, experiences and voices have fed into our knowledge that change is needed. We have built partnerships and relationships across public, third and private sectors. In 2020, midway through lockdown, we held conversations with over 300 people working in public services - mental health, social care, substance use, homelessness and housing - about how lockdown impacted the ways we supported people. These conversations named many of the challenges and tensions facing leaders across housing, health, and care. The findings are contained in our report **Lessons from Lockdown: Conversations for Change.**<sup>1</sup>

Work with UK partners has shown us that this is not just a 'Wales problem.' People across the UK and the wider world recognise a growing feeling that things are not working, that our collective mental health is worsening, and that we are increasingly struggling, particularly in these difficult times. But the support isn't always there, and when it is, it doesn't always help.

Our current public service systems and policies were designed in the post-war days. The world has changed since then; this means we can, and must, redesign our public systems to better support us today. We need systems that prioritise relationships and connection, and that work better as a whole ecosystem, for everyone. This is why we want to be part of the movement for change - so we can try new things, change the system, and build a better future for all of us.

## OUR PURPOSE IS TO CHANGE THE NARRATIVE AROUND MENTAL HEALTH AND MAKE OUR PUBLIC SYSTEMS WORK BETTER FOR PEOPLE FACING THE TOUGHEST TIMES.

In this manifesto, we will explore new and emerging evidence that helps us better understand our own mental health and that of the whole population. We will examine what this means in terms of our current mental health systems and other helping systems, and show what needs to change.

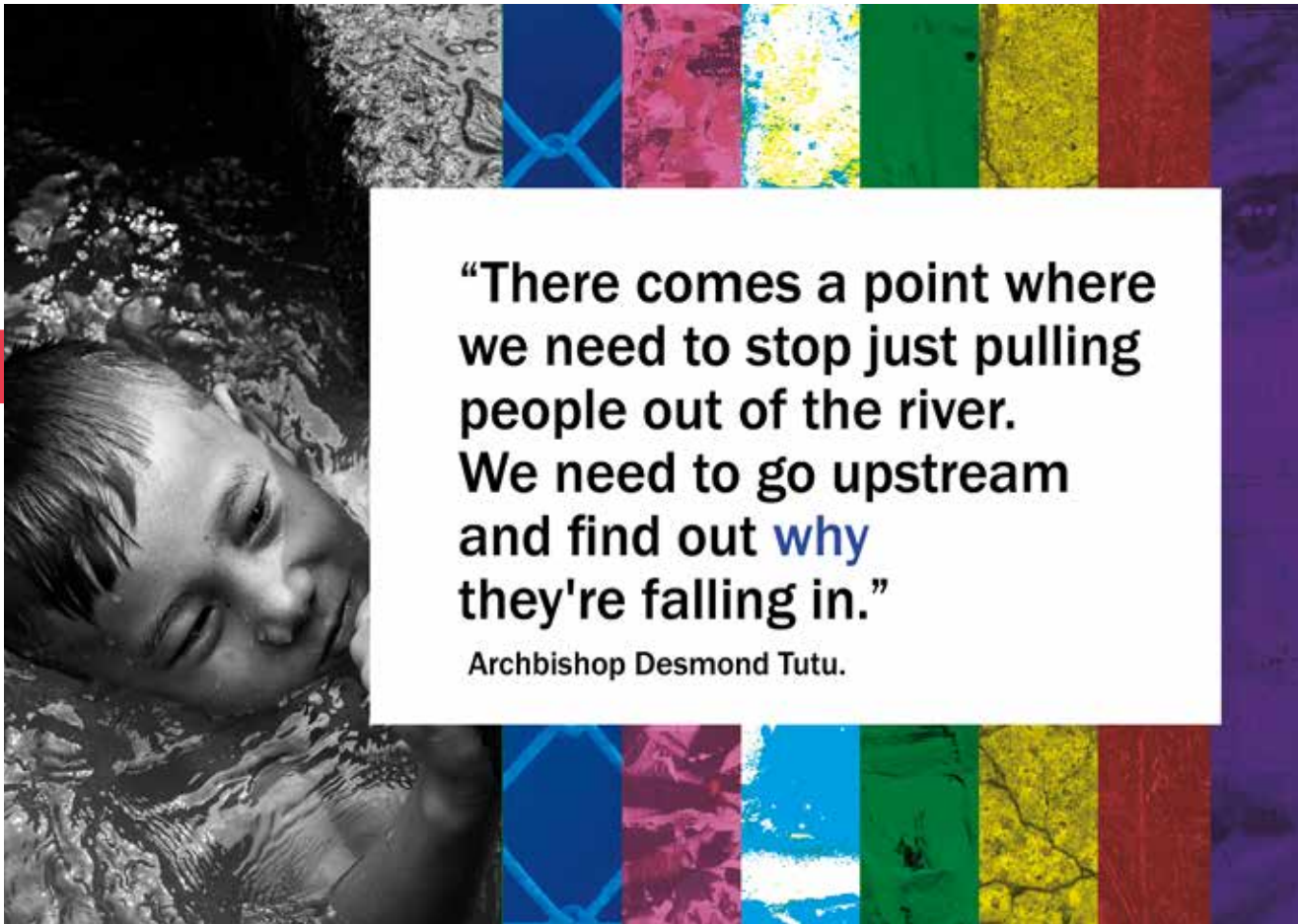
We were delighted with the release of the Senedd Health and Social Care Committee report **Connecting the Dots: Tackling Mental Health Inequalities in Wales**<sup>2</sup> in December 2022, which echoed many of our challenges to the system. We recognise many of our ideas for change in the report, but particularly the fact that the 'medical model' of mental health fails to understand and address people's broader needs. The recognition that mental health disproportionately impacts people experiencing poverty is a powerful endorsement of Platform's work in this area.

The foundations need to continue being built, and we're clear that this is the responsibility of our elected politicians in Wales, and of our Welsh civil servants. But the changes that we present to you here will not be achieved solely through politicians creating policies. It will require each of us to change.

Our Lessons from **Lockdown: Conversations for Change.**<sup>1</sup> research showed us, very clearly, that this change can come from within. It happens when we are supported by leaderships, power structures and organisational cultures that help us to feel safe, trusted and encouraged. It happens when we are allowed to make mistakes, and when we can learn from them.

For many, that's very different to how third sector and public sector organisations can feel at the moment. But that just makes it all the clearer:

# THIS CHALLENGE IS ONE FOR ALL OF US.



**“There comes a point where we need to stop just pulling people out of the river. We need to go upstream and find out **why** they're falling in.”**

Archbishop Desmond Tutu.

## **2: GOING UPSTREAM** **THE FOUNDATIONS** **OF MENTAL HEALTH**

Living in 21st Century Wales, our human needs are decent housing, a sustainable income, good food, a healthy environment, culture equality, local amenities and a sense of belonging. If we don't have these social needs met, then it is impossible for support systems to provide us with anything other than short-term fixes.

This means mental health services, and others, are continually stuck trying to rescue people out of the river **after** they have fallen in. It's time to go upstream and find out why people are falling into the river in the first place.

**Our current approach to mental health is harming people and means lives are being cut short.<sup>3,4</sup>**

For too long we have focused on seeing people as 'abnormal' and in need of correcting or 'fixing.' We have been seeing mental illness through a medical lens, rather than one of social justice. Mental health services force labels and treatment on individuals, but this is frequently ineffective and perpetuates power imbalance, causes mistrust, and exacerbates stigma and discrimination. It has made many fearful of seeking help from mental health services.<sup>5</sup>

**WE NEED A MENTAL HEALTH SYSTEM THAT CAN SUPPORT US.**

Currently, it is complex, inflexible, fragmented, and built around healthcare and medical solutions. There is widespread public concern about levels of distress and suicide. There is growing outrage, too, at how we treat people, with rates of dehumanising coercion and inhumane treatment increasing.<sup>6,7</sup> It's not OK that we live in a society where our helping systems are harming us

**But it doesn't have to be this way.** Every system we operate in today has been designed by people. This is a crucial point. It is delivered by people **who want to help**, and who want to make life easier, not harder.

The system is getting in the way of our human compassion, but it is not beyond us to redesign the system so that it works for everyone.

This is not where the change ends. When we're able to see the bigger picture, something becomes very clear: mental health difficulties don't occur equally across the population according to 'personal resilience' or biology. The truth is that mental health difficulties disproportionately affect people in poverty, or who live in communities that have been left behind.<sup>8</sup>

**OUR MENTAL HEALTH IS LARGELY DETERMINED BY THE CONDITIONS IN WHICH WE ARE BORN, GROW, WORK, LIVE, AND AGE ALONG WITH THE WIDER SET OF FORCES SHAPING THE CONDITIONS OF OUR DAILY LIVES.<sup>9</sup>**  
WORLD HEALTH ORGANIZATION



Constantly being denied the things we need and feeling we do not belong can lead to anxiety, depression and other mental health problems,<sup>10</sup> resulting in people in our most traumatised communities here in Wales dying two decades earlier compared to affluent communities.<sup>11</sup> The impact of this health inequity is costing NHS Wales an additional £322 million per year and accounts for 8.7% of our total NHS hospital expenditure.<sup>12</sup>

Deprivation and injustice are causes of mental illness. When we do not have what we need it puts immense strain on us, our families, and communities. This leads to experiences of injustice, adversity, trauma and despair. This, in turn, leads to neglect, abuse, poor health and lives being cut short.<sup>3</sup>

Stress, trauma, poverty and violence experienced during the first 1,000 days of a baby's life can have lifelong adverse effects on health and wellbeing. This is because the first 1,000 days are when a child's brain undergoes accelerated growth and development, and when the foundations for their lifelong health are built. How well or how poorly mothers and children are nourished and cared for during this time has a profound impact on a child's ability to grow, learn and thrive.

Nearly 4 in 10 Welsh households cannot afford anything beyond essential everyday items.<sup>13</sup> Wales has the highest levels of child poverty in the UK.<sup>14</sup> As people's situations have worsened, anti-depressant prescription rates have increased. It's a steady climb that has been happening in Wales over the past 20 years, and includes a 30% rise in anti-depressant use with children.<sup>15,16</sup>

The closure of the coal, steel and iron industries, followed by rural isolation, has left a legacy of long-term unemployment, poor health, and high rates of poverty within communities that were once flourishing.

Despite these significant barriers, the sense of mutual support, community resilience and belonging are still strong in Wales.

“The inequalities [in Wales] are getting bigger in life expectancy [but] the people I talked to in Wales are terrific. There are a lot of committed people in Wales who I think are ready and willing to act.” – Sir Michael Marmot <sup>17</sup>

While the impact on poorer communities is greater, we all suffer from the consequences of disconnection and overwhelm.<sup>18</sup> We've less time and energy to take care of ourselves or be there for the people we love, storing up problems for our future generations. <sup>6, 17, 19</sup>

The foundations for us to thrive as human beings are **safety, purpose, and connection.**<sup>3</sup> These aren't just nice words. They mean that as human beings we all need practical things like a sustainable income, decent housing, good nutrition, a healthy environment, thriving culture, equality, local amenities and transport to make it easier to participate in society and connect with each other.<sup>9</sup>

**BUT WE ALSO NEED GOOD RELATIONSHIPS, AND TO FEEL WE BELONG.**<sup>19</sup>

**Solving the mental health crisis is not about more access to one-to-one therapy or counselling, and it's not about creating more mental health services.**

**It's about meeting our fundamental need for connection and creating healthy, thriving communities in which people can grow,**

**LIVE AND HEAL.**



## 3: A MENTAL HEALTH EVOLUTION: A HOLISTIC AND SOCIAL JUSTICE APPROACH

It is well documented that our current approach to mental health needs to evolve.<sup>4, 5, 9</sup> Mental health is not about what's **wrong** with us. It's about what's **happened** to us, and what should have happened for us but didn't. It's about what we did to survive, and what impact this has on our mind, body, and soul. That impact is felt by us and any future children we may have. <sup>4, 20, 21</sup>

If we understand that distress and mental health are rooted in our circumstances, and not in disease and pathology, then it's clear how we need to evolve. **We need a holistic and social justice approach, built on an understanding of the impact of poverty, adversity, injustice, and trauma.**

By holistic we mean our mind, body, soul and circumstances. At its simplest, this is about having a healthy nervous system and connection to self, others, and the world.<sup>22</sup>

Social justice means that everyone deserves equal economic, political and social rights and opportunities. We aren't all affected equally, but none of us is immune to the collective impact of a society where access to these things is unequal.

Taking a holistic social justice approach to mental health will reduce our exposure to trauma and prevent people becoming distressed and unwell in the first place. To do this, **we need systems that are compassionate, fair and just. We need a society in which everyone feels they belong and can thrive.**

Good mental health comes from having the essential building blocks in place: **fair work, good pay, quality housing, good childcare, good education, access to transport, green spaces, inclusion, and opportunities for connection and relationships.** <sup>23</sup>

We all have a part to play. This is a whole society task; it will take 'the village' (a whole system approach) to create the conditions in which we can all thrive. It is about how we act as neighbours, friends, and citizens as much as it is about leadership, workplace culture, our public systems, and our policy and legislation.

**'MENTAL HEALTH IS FUNDAMENTALLY ABOUT SOCIAL HEALTH.**

**IT IS NOT A DIY PROJECT.' — PSYCHOLOGISTS FOR SOCIAL CHANGE CYMRU**

# 4: THE OPPORTUNITY IN WALES

The journey towards change has already begun, and the building blocks of a better system in Wales are already being laid. What we need next is long-term commitment to continue driving that shift forward. This means creating sustainable conditions and committing to a journey that we know will take decades to realise.

Wales has already begun creating the space needed to try new approaches. While there is a long way to go, we should take stock and feel proud that crucial evidence-based change has already been made.

The pioneering Well-being of Future Generations Act provides a mechanism where our present society can think about those who come after us. There are still ways this can be strengthened, and ways in which the Future Generations commissioner can deliver accountability, but as a framework it is a powerful tool in our journey forward.

Other legislation has played a part in creating an environment that can help us change the system. The Social Services and Well-being (Wales) Act embeds choice and control at the heart of the law and encourages local authorities to work in close partnership with the third sector and social enterprises. The Housing (Wales) Act led the UK in moving towards prevention and helped pave the way for a focus on trauma-informed work. The Violence Against Women, Domestic Abuse and Sexual Violence (Wales) Act brought in the 'Ask and Act' duty, a building block towards bringing our system together around a common purpose. The Additional Learning Needs (Wales) Act is transforming how children receive support, and the Social Partnership Bill is another opportunity to build on the progress being made.

This legislation sits alongside a track record of progressive policy delivery: a basic income pilot, a new national curriculum, the protection of our culture and language, our status as a nation of sanctuary, a recognition of the importance of green spaces and the environment, and much more.

There is a lot to be proud of, and so it is from a place of hope that we make the following further recommendations for transformation and change.

# 5: OUR RECOMMENDATIONS



Our aspiration of a healthy and just Wales will take time, but we can lay out steps that will take us forward and make longer term commitments to help keep us on that journey.

### These are our recommendations:

- **Challenge restrictive and coercive practices in mental health services by implementing the [Reducing Restrictive Practices framework](#) <sup>26</sup>, and making this shift a key feature of the next mental health strategy for Wales.**

This would mean reducing restraint in mental health services, and challenging long-term detentions and the use of seclusion and exclusion. It would mean working towards environments that foster healing and connection.

- **Create a second pathway for people experiencing mental health challenges that prioritises social interventions and holistic psychological support.**

This could include moving towards other evidence-based interventions such as alternatives to hospital in every community, understanding distress through other means than diagnosis, building on the work of Traumatic Stress Wales and ACES Hub Wales, and using alternatives to traditional interventions. These alternatives focus on creating human, compassionate places or responses that foster psychological safety.<sup>25</sup>

- **Develop a public health approach to relational health by partnering with families and communities.**

"Relational health refers to the ability to form and maintain safe and secure nurturing relationships, as these are potent antidotes for childhood adversity and toxic stress responses."<sup>26</sup>

A new public health approach to relational health needs to be integrated in primary, secondary, and tertiary preventions as well as across public service sectors beyond health care.<sup>26</sup> This would include an understanding of how trauma, poverty and other social determinants contribute to our mental health. Ensure this includes a public information campaign that tackles outdated or untrue information, such as the 'chemical imbalance' theory of depression, equipping the population with an accurate understanding of what influences our mental health to increase the opportunity for informed patient consent.

# TAKE A HOLISTIC AND SOCIAL JUSTICE APPROACH TO MENTAL HEALTH

We must shift away from the medicalisation of trauma and distress to an evidence-based social model that is relational (understanding of relationships and interconnectedness), and that is trauma informed and holistic in its approach.

● **Ensure healthcare professionals and other public sector workers have core training on relational health and the impact of the social determinants of mental health.**

This would mean inclusion of how trauma, poverty and other social determinants contribute to our mental health, alongside learning around compassionate, rights-based and holistic responses that foster psychosocial safety.

● **Implement the recommendations of the December 2022 Senedd Health and Social Care Committee report.**

The report [Connecting the Dots: Tackling Mental Health Inequalities in Wales](#).<sup>2</sup> demonstrates clearly how poverty and discrimination impact our mental health, and shows that we need to tackle these root causes of distress to truly address poor mental health. We welcome and support this report, and call upon Welsh Government to implement its recommendations in full.

● **Create a Mental Health and Social Justice Minister for Wales.**

This role would hold the mental health budget and enable coordination of the third 'Futures' budget line on a cross-departmental basis.

We recognise that communities, as well as individuals, can have adverse experiences.

We want to see Welsh families living in thriving communities that support connection. We want communities to be given the agency and resources to implement their own solutions to their own challenges, based on local knowledge. All too often, solutions are imposed from above, but relationships are unique to place and, therefore, so are most solutions.

**GIVE  
COMMUNITIES  
THE RESOURCES  
TO HEAL FROM TRAUMA**

● **Put reducing and tackling poverty at the heart of all government policy and legislation, with a particular focus and relentlessness in the approach to ending child poverty.**

This would mean we see poverty as a cause of mental illness, and therefore see equality as a mental health intervention.

● **Ensure the social determinants of mental health are core to successive programmes of Government, with a combination of targeted and universal actions.**

The welfare system needs to be reviewed and overhauled to meet the needs exposed by the pandemic, ensuring universal basic services are available to enable safety, opportunity, and participation as per the 2017 Bartlett review.<sup>27</sup> Government should actively work to expand the safety net and create the conditions to alleviate the toxic stress of poverty and inequality.

● **Prioritise the establishment of specialised parent-infant relationship services within each of the NHS Wales Health Boards to repair strained or compromised relationships and prevent adversity in those crucial first 1,000 days of a child's life.<sup>28</sup>**

Adopting 'the village' (a whole system) approach to public service delivery would involve breaking down silos and a greater mainstream use of multi-agency teams built around the whole family. More widely, we should be enabling service capacity so all professionals can have a role in wider systems transformation.

● **Ensure all public sector budgets are as local and equal as they can be.**

People should have far more power and influence over their own communities. This would include wider use of accessible participatory budgeting, and the use of proactive approaches to inclusion and coproduction to meaningfully engage a wide range of voices and communities.

● **Review the [Well-being of Future Generations Act](#) and strengthen its legislative powers to ensure the community can enforce the principles of the Act for the benefit of future generations.**

The [Well-being of Future Generations Act](#) should challenge all decision makers to think about the long-term implications of policies, hold politicians and public bodies to account, and give the citizens of Wales legally enforceable rights.

One of the biggest sets of barriers for implementing change has been financial.

Economic and financial pressures have undeniably impacted on the ability of the Welsh Government to meet the aspirations behind many of its own policies. These pressures have ensured that the understandable decisions made to prioritise NHS budgets have come at the expense of the services that keep people from requiring use of the NHS. The resulting increased pressures on the NHS reinforce the political pressures to “focus on the NHS”, at the expense of other preventative services.

This cycle is unsustainable, financially inefficient, and bad for our health. We need to move beyond small budgets, short termism and siloed thinking.

# REMOVE THE FINANCIAL BARRIERS TO CHANGE AND CREATE A ‘FUTURES’ BUDGET LINE

## Adopt a third category of finance (‘Futures’) to sit alongside revenue and capital.

This would be a separate budget category that ensures significant resources will be focused on moving provisions towards being preventative, allowing these provisions to act further ‘upstream’ and overcome the difficulties with short term political cycles. It would aid transparency within budgets, help to address siloed thinking within departments, and increase the incentives to properly fund transformation.

## Adopt an approach to setting government budgets and evaluating programmes that incentivises doing ‘the right thing’.

This includes a complete transformation of the commissioning environment so there is an incentive to focus on longer-term results, rather than short-term cost-driven measures. This could involve the ending of cost-volume contracts, increased use of block contracts for sector sustainability, more appropriate and limited use of spot commissioning, a further refocus on quality versus cost, and an increase in use of personal budgets.

## Adopt new financial responsibilities for all public sector bodies to enable a ‘no wrong door’ approach.

This means meeting people’s needs in the first instance: offering the right support, at the right time, in the right way. This will need a more holistic approach to setting and auditing budgets; a saving for one service may mean massive costs to another. People who are refused support from one department can often end up requiring more expensive support as a result of their needs not being addressed, meaning short term savings never materialise and the whole system ends up ‘costing’ more.

## Advocate for changes to the political culture around how budgets are debated and scrutinised, in order to ensure long term sustainability and a cross party consensus behind the concepts of ‘Futures’ budgeting.

This means campaigners and politicians across Wales holding ourselves accountable for how we act, how we hold each other to account, and how we advocate for alternatives. We want debates over policy proposals to move away from “how much does it cost?” and towards being evaluated on their whole system impact –asking questions such as “what is the cost of not doing this?” or “what could be the impact on future generations?”

**THESE PROPOSALS ARE JUST THE START OF THE CONVERSATION BUT THEY ARE VITAL FOR THE HEALTH AND POTENTIAL OF FUTURE GENERATIONS, AND OF THE PLANET. THEY ARE THE NEXT STEPS TOWARDS A WORLD WHERE WE'RE NOT JUST SURVIVING, BUT ARE INSTEAD THRIVING TOGETHER.**

**THEY ARE NOT EVERYTHING. IT WILL TAKE MORE IDEAS, MORE CONTRIBUTIONS AND MORE TEAMWORK, AND AS WE PROGRESS WE'LL NEED AS MANY PEOPLE AS POSSIBLE TO JOIN THE JOURNEY.**

**WE ALL HAVE AN IMPORTANT TASK AHEAD OF US, AND NO TIME TO LOSE.**

# THE SHOULDERS WE STAND ON

We have not arrived here alone. We want to acknowledge and thank all those that came before us for their hard work, persistence, sacrifice, dedication, laughter and tears in their efforts to make the world a more just and fair place.

We acknowledge all the groups, organisations, professionals and citizens who advocate for people who have been harmed by structural injustice.

We particularly acknowledge the brave efforts of the survivor activist movements who have fought for, and continue to fight for, change to our mental health systems.

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# WE WANT TO THROW

In a system that's struggling to adapt to worldwide stresses and inequality, we are seeing thousands of people every year facing challenges with their mental health.

With fresh evidence emerging that mental health is determined more by poverty and trauma than any biological cause, we need to ask ourselves what the system is getting wrong.

This is our manifesto for social change based on social justice. Small changes to health systems won't be enough. More funding for existing approaches is not the answer. We need to build stronger foundations together.

We need to challenge our leaders to make different choices.

But we also need to work together to change our society.

Each of us has a vital role to play in creating a new society – because once we do, all of us will thrive.