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Mental health – evidence summary

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Disclaimer: This evidence summary includes relevant literature identified from searches on the above topic. It is not an exhaustive list, it presents key finding and not recommendations for practice.

Overview

For the purpose of this report we will be looking at people with mental health issues who require support or may require support, rather than people maintaining or trying to maintain good mental health.

This report looks at the issues that are faced by people with mental health issues and the barriers they might face when trying to access health and care services. It looks at some specific mental health issues and the additional challenges these conditions can cause, conditions covered in this report include anxiety disorders, depression, schizophrenia, personality disorders, and substance use disorder. It then looks at additional issues that specific groups of people with mental health issues may experience. These include people with mental health issues who are older, people from ethnic minorities, LGBTQ+, women, men, neurodivergent, and people who are deaf.

The report focuses on research and reports based mainly on Wales or the UK. Research from elsewhere is only included when relevant.

Challenges faced by people with mental health issues

People living with mental health issues can face many challenges. These might include:

- Being more likely to also be living with physical health issues [1]
- Being more likely to die before reaching the age of 75 [1]
- Being more likely to be out of employment [1]
- Impacting their work, taking time off or reducing their hours [1]
- Being more likely to experience financial difficulties [1]
- Impacting on their social relationships [1]
- Deteriorating mental health whilst waiting for appointments [1]
- Feeling that their mental health isn't bad enough to access support [1]
- Experiencing stigma, including ignorance, discrimination, and prejudice [1]
- Workplace stigma, for example being less likely to be promoted [1]
- A focus on treating the condition while failing to recognise and address underlying issues (housing, unemployment, abusive relationships) [2]

Although this report doesn't go into the contributors of mental health issues, we cannot overlook poverty which has a huge impact on a person's mental health, beyond being just a contributor towards poor mental health[1–5]. Poverty can also be a consequence of poor mental health[1,2,4,5], and living in poverty can mean a person is more likely to experience unfair treatment[1], be less likely to seek help[4], and less likely to recover after treatment[4].

"17 years since first reaching out for help I'm finally in a safer place, but the waiting times during this period have not only been frustrating but life-threatening and I consider myself lucky to have survived" Gavin [1]

"In our local area, you have to attempt suicide multiple times before getting help." Anonymous [6]

People living with mental health issues can face barriers to accessing mental health services. These might include:

- Poor quality of care once accessing a service [6]
- Support from services not meeting their needs [1]
- A lack of provision [7]
- Services being poorly designed [6]
- Being turned away until they get more unwell and reach crisis point [6,7]
- Not being taken seriously when seeking support [8]
- Long waiting times for support [6–8]
- Services not being connected enough to provide smooth transitions and appropriate signposting [6]
- Being sent away with medication rather than therapeutic support [6]
- Gaps in thresholds for services, with people being passed from one service to another being told their needs are too high or not bad enough [6]
- Being sent far from home to access support [6]
- A & E not being a suitable environment for a mental health crisis [6]
- Poor crisis care, lack of availability, poor quality and poor follow up care [7,8]
- Challenging transitions between child and adult services [6]
- Stigma around mental health [1,4]
- Living in a rural location with poor digital connectivity, being far from services, and limited transport options [4,7]
- Inadequate Welsh language service availability [7]

Challenges faced by people with specific mental health conditions

Anxiety disorders

People living with an anxiety disorder can face additional challenges. These might include:

- Missing days from work or being less productive [9]
- Avoiding socialising leading to isolation [9]
- Relationships with partners, family, and friends being affected [9]
- Impacts on physical health [9]
- Feelings of stigma / shame preventing them seeking help [9]

Depression

People living with depression can face additional challenges. These might include:

- Being more likely to have another co-occurring mental or physical health condition [10]
- Being more likely to be living with chronic pain [10]
- Being more likely to visit A&E [10]
- Those living in deprived areas being more likely to have long-term conditions, more complex prescribing, and higher rates of unplanned care use [10]

Schizophrenia

People living with schizophrenia can face additional challenges. These might include:

- Their condition being misunderstood, and people believing them to be dangerous and unpredictable [1,11]
- Stigma preventing someone seeking support or taking to someone [11]

Personality disorders

People living with personality disorders can face additional challenges. These might include:

- Being at increased risk of stigma and lack of support [2,12]
- Being inappropriately diagnosed with personality disorders when their symptoms may be normal responses to trauma [2,12,13]
- Their traumas being dismissed [13]
- Receiving negative treatment from health professionals, being ‘blamed’ or stigmatised [2,12]
- Inconsistent diagnosis [12]
- Diagnoses disproportionately given to women [13]
- Support services failing to support recovery, and contributing to fear, mistrust, and suffering [13]
- Mistrust of professionals preventing them seeking help [13]
- Lack of involvement in decisions about them and their care [13]
- A diagnosis having life-limiting consequences, in areas such as employment, identity, and life chances [13]

Substance use disorder

The relationship between substance use and mental health is complex. People who have substance use disorder often have other co-occurring mental health issues. Mental health can contribute to a person using substances, but using substances can also contribute towards the development of additional mental health issues. It is for these reasons it is important to treat the whole person, which often doesn't happen and we find people being pushed from one service to another.[14]

People with substance misuse and co-occurring mental health issues can also face additional challenges. These might include:

- Worsening psychiatric symptoms [4,14]
- Being stuck in a cycle of substance use and mental health issues [14]
- Many people not fitting the stereotype of what we think of as an addict [14]
- Poorer physical health [4]
- Increased use of institutional services [4]
- Poor medication adherence [4]
- Increased risk of homelessness [4]
- Increased risk of HIV infection [4]
- Greater dropout from services [4]
- Specialist services not working together [4,14]
- Being pushed between substance misuse and mental health services [14,15]
- Long waiting times for substitute prescribing, detox, rehab and counselling [15]
- Lack of out of hours support when they may be more vulnerable to relapse [15]
- Being refused support until they have addressed their substance use issues [4,14]
- Increased risk of committing crimes and / or being in contact with the criminal justice system [4]

Challenges faced by specific groups of people with mental health issues

Risk of mental health issues is linked to inequalities in society, with those who face disadvantage and discrimination being much more likely to experience mental health problems.[3] We consider below some groups who are disadvantaged and who face additional challenges if they experience mental health issues. Within these groups individuals' experiences can be very different, and inequalities / characteristics can co-occur and exacerbate the difficulties they face, making it important to consider the individual rather than just aspects of their identities.[2]

Older people

Older people can be more vulnerable to mental health issues. This might be due to:

- Being at increased risk of social isolation [16]
- Being more likely to experience and be impacted by digital exclusion [16]
- Transitioning between services, for example going into a care home [16]

Older people with mental health issues can face additional challenges. These might include:

- Being reluctant to talk about mental health due to stigma [16]
- Not being able to access online support services [7,16]
- Experiencing ageism, with mental health issues being normalised and dismissed as a normal part of ageing [1,2]
- Being more likely to be a carer themselves [2]
- Lack of appropriate provision [7]
- Being most affected by waiting times for mental health services [7]
- Fear of losing independence if they ask for help [7]

Ethnic minorities

People from ethnic minorities living with mental health issues can face additional challenges. These might include:

- Being less likely to access mental health services [1]
- Less likely to be referred by their GP for support [7]
- Being more likely to report unfair treatment by support / health services [1]
- Experiencing racism and discrimination [2–4,8]

- Being more likely to experience multiple difficulties such as issues with health or housing, or barriers to education and employment [3]
- Language barriers, including inadequate translation [2,4,8]
- Lack of cultural awareness or cultural sensitivity [2,4,5,8]
- Services being based around white people and staff being predominately white [4,8]
- Services being unwilling to engage with a person's spiritual needs [4]
- Confusing people's racial, cultural and spiritual presentation with illness, leading to misdiagnosis and more severe treatment [4]
- Lack of publicity of mental health services in some communities [4]
- Experiencing an imbalance of power between themselves and the service provider [4]
- Cultural stigma around mental health issues detering them from seeking help [4,8]
- Being reluctant to seek help due to pressure to conform to cultural expectations of strength / resilience [4]

Gypsy, Roma and Traveller communities

The Gypsy, Roma and Traveller communities can experience specific challenges if they have mental health issues. These might include:

- Being apprehensive about seeking help [4]
- Feeling misunderstood or treated unsympathetically by healthcare workers [4]
- Having difficulties asking for help at all [4]

LGBTQ+

People who identify as LGBTQ+ living with mental health issues can face additional challenges. These might include:

- Being more likely to report unfair treatment by support / health services [1,4]
- Experiencing discrimination [2,4]
- Having been pressured to access health services to question or change their sexual orientation in the past [4]
- Avoiding treatment for fear of discrimination [4]
- Not disclosing their sexual orientation or identity when accessing support [4]

Women

Women living with mental health issues can face additional challenges. These might include:

- Being at increased risk of mental health issues [1]
- Being more likely to report an attempted suicide attempt [1]
- Increased risk of self-harm [1]
- Being more likely to report unfair treatment by GP services [1]
- Mental health issues making them more vulnerable to domestic abuse [4]
- Hormonal changes impacting their mental health [17]

Men

Men living with mental health issues can face additional challenges. These might include:

- Being at increased risk of dying by suicide [1,18]
- Being more likely to report unfair treatment by voluntary / third sector organisations [1]
- Being less likely to access talking therapies [4]
- Being more likely to be held or kept within the healthcare or legal system due to their mental health [4]
- Masculine stereotypes preventing them seeking help [18]

Neurodivergence

People who are neurodivergent (autistic, ADHD) and have mental health issues can face additional challenges. These might include:

- A lack of joined up services [3]
- Limited awareness and training of support staff [3]
- Diagnostic overshadowing, symptoms being dismissed or assumed to be due to their neurodivergence [2,3]
- Fear being kept in hospital if they seek help [7]
- Lack of accessible support and information [19]
- Being more likely to receive lower quality care [20]
- Increased risk of dying by suicide [20]

People who are deaf

People who are deaf and have mental health issues can face additional challenges. These might include:

- A lack of mental health provision for deaf people [7,21,22]
- A lack of access for those who use British Sign Language [7,22]
- Having to travel to England for inpatient provision [21]
- Support not being culturally sensitive to the deaf community [22,23]

Search strategy

Basic searches of Senedd Research, Gov.wales, Insight Collective, Mind Cymru, and Google were completed. A database search of Scopus was completed but not used due to the volume and relevancy of the articles and given the substantial volume of information already available from other sources. See the search strategy below for reference.

Scopus

"mental illness*" or "mentally ill*" or “mental health issue*” OR “mental health problem*” OR “mental disorder*” OR schizophren* OR “personality disorder*” OR “substance misuse” OR “substance use*” OR “anxiety disorder*” OR “bipolar” OR “mental ill health” OR depression OR “depressive disorder*” OR “mental health condition*” (title)
AND
need* OR requirement* OR demand* OR support* OR assistance OR help OR barrier* OR challenge* OR obstacle* OR issue* OR problem* OR difficult* OR concern* OR risk* (abstract)
AND
england OR scotland OR wales OR "united kingdom" OR UK OR Britain (affiliation country)
AND NOT
child OR children OR youth OR adolescen* OR teen* OR infant* OR toddler* OR school* (article title, abstract, keywords)
Limit: 2021-2026

References

(1) *The Big Mental Health Report | Mind*. https://www.mind.org.uk/about-us/our-policy-work/the-big-mental-health-report/ (accessed 2026-04-07).

(2) *Mental Health Inequalities*. https://senedd.wales/committees/health-and-social-care-committee-sixth-senedd/mental-health-inequalities/ (accessed 2026-04-08).

(3) *Is the Welsh Government doing enough to address mental health inequalities?* https://senedd.wales/senedd-now/senedd-blog/world-mental-health-day-is-the-welsh-government-doing-enough-to-address-mental-health-inequalities/ (accessed 2026-04-08).

(4) *Mental health and wellbeing strategy: equality impact assessment | GOV.WALES*. https://www.gov.wales/mental-health-and-wellbeing-strategy-equality-impact-assessment (accessed 2026-04-09).

(5) Mind Cymru. *Living on the Edge: Poverty and Mental Health in Wales*; 2025.

(6) *National conversation about mental health in Wales | Mind*. https://www.mind.org.uk/about-us/mind-cymru-mind-in-wales/national-conversation-about-mental-health-in-wales/ (accessed 2026-04-07).

(7) *Connecting the dots: tackling mental health inequalities in Wales*. https://senedd.wales/committees/health-and-social-care-committee-sixth-senedd/connecting-the-dots-tackling-mental-health-inequalities-in-wales/ (accessed 2026-04-09).

(8) *Priorities for the Welsh Government's next Mental Health Strategy*; 2024.

(9) Mental Health Foundation. *Uncertain Times: Anxiety in Wales and How to Tackle It Report*; 2023. https://www.mentalhealth.org.uk/sites/default/files/2023-05/MHF-Wales-Uncertain-times-Anxiety-in-the-UK-and-how-to-tackle-it-MHAW-2023-report-English.pdf.

(10) *Inequalities in health care for people with depression and/or anxiety | The Health Foundation*. https://www.health.org.uk/reports-and-analysis/briefings/inequalities-in-health-care-for-people-with-depression-and/or (accessed 2026-04-10).

(11) *Understanding and Supporting those with Schizophrenia – Mental Health First Aid Wales*. https://mhfawales.org/understanding-and-supporting-those-with-schizophrenia/ (accessed 2026-04-10).

(12) *Why is personality disorder diagnosis controversial?* | *Mind*. https://www.mind.org.uk/information-support/types-of-mental-health-problems/personality-disorder/why-is-personality-disorder-controversial/ (accessed 2026-04-10).

(13) *The Hidden harm of the diagnosis of personality disorder report*. Platfform. https://platfform.org/the-hidden-harm-of-the-diagnosis-of-personality-disorder-report/ (accessed 2026-04-10).

(14) Royal College of Psychiatrists. *Co-Occurring Substance Use and Mental Health Disorders (CoSUM)*; 2025. https://www.rcpsych.ac.uk/docs/default-source/improving-care/better-mh-policy/college-reports/college-report-cr243---cosum.pdf.

(15) *Substance Misuse Services in Wales* | *Healthcare Inspectorate Wales*. https://www.hiw.org.uk/substance-misuse-services-wales (accessed 2026-04-13).

(16) *Mental Health and Wellbeing Strategy*. Older People's Commissioner for Wales. https://olderpeople.wales/mental-health-and-wellbeing-strategy/ (accessed 2026-04-07).

(17) *Women and mental health*. https://www.mentalhealth.org.uk/explore-mental-health/a-z-topics/women-and-mental-health (accessed 2026-04-10).

(18) *Men's mental health*. Mental Health UK. https://mentalhealth-uk.org/mens-mental-health/ (accessed 2026-04-10).

(19) *The challenges neurodivergent people face receiving care* | *Healthwatch Bathnes*. https://healthwatchbathnes.co.uk/blog/2023-08-24/challenges-neurodivergent-people-face-receiving-care (accessed 2026-04-10).

(20) Jackson, C. *Care challenges for neurodiverse people*. Healthwatch Northumberland. https://healthwatchnorthumberland.co.uk/care-challenges-for-neurodiverse-people/ (accessed 2026-04-10).

(21) Terry, J.; Meara, R.; England, R. "They Still Phone Even Though They Know I'm Deaf": Exploring Experiences of Deaf People in Health Services in Wales, UK. *J.*

Public Health Oxf. Engl. **2024**, *46* (3), e520–e527. https://doi.org/10.1093/pubmed/fdae112.

(22) Terry, J.; Robins-Talbot, C. Mental Health First Aid™ for Deaf Communities: Responses to a Lack of National Deaf Mental Health Service Provision. *J. Public Ment. Health* **2024**, *23* (2), 107–116. https://doi.org/10.1108/JPMH-12-2023-0107.

(23) Wilks, R. Unseen and Unheard: How the Future Generations Act Is Not Addressing the Needs of the Welsh Deaf Community. *Disabil. Soc.* **2025**, *40* (11), 3159–3185. https://doi.org/10.1080/09687599.2024.2412267.