



# Mind Cymru Briefing Paper: Young people & the ‘missing middle’

Insights from young people’s lived experience,  
a new service model & what this means for  
Wales

July 2025

## Introduction:

For a number of years significant attention has been placed upon ensuring that ‘**the missing middle**’, a term developed thanks to the work of the Children, Young People and Education Committee in 2018<sup>1</sup> (extract below), is both acknowledged and addressed by Welsh Government and local decision-making partners across Wales.

The Committee defined the term as:

**182.** The vast majority of witnesses commented that urgent work was needed to address **the lack (and in some cases absence) of services for children and young people who need support but do not meet the threshold for specialist CAMHS or ND support.** Many witnesses referred to these children as the so-called

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<sup>1</sup> <https://senedd.wales/media/jr4oyh4p/cr-ld11522-e.pdf>

“missing middle”, referring to the **almost complete absence of services for them.**

As part of our most recent engagement work with young people, during the development of Welsh Government’s new strategy for mental health, we heard that **too many of them continue to find it difficult to access the support they need, when they need it.** We felt compelled to follow-up on this and to better understand their lived experiences.

Alongside this a **new service model**, designed with young people and delivered by colleagues across **our network of local Minds** across Wales, was in being piloted. This briefing paper brings together the insight from the young people we spoke to along with the learnings from the pilot service delivery to understand experiences, gaps in provision and potential solutions.

### **A children’s rights issue:**

Wales has a long history demonstrating its commitment to children’s rights. The **United Nations Convention on the Rights of the Child (UNCRC)**<sup>2</sup> is the internationally recognised framework which sets out what these are and how governments must uphold them, once ratified. Many of the Convention’s articles relate to children’s mental health, and since 2011, Welsh Government Ministers have a **legal obligation to pay due regard** to them<sup>3</sup>.

Among the 54 Articles, **every child’s right to the highest attainable standard of health, and to health care services** that help them to achieve this, including mental health, is outlined within Article 24. Article 12 outlines children’s right to express their views in all matters affecting them, and that their views should be taken seriously.

**We all have a responsibility to respect, protect and uphold children’s rights** and the UNCRC. Mind Cymru believes strongly in adopting a rights-based approach and works with its principles in mind. It is with this in mind, that we specify the articles above as those most relevant to this piece of work. It is our

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<sup>2</sup> <https://www.ohchr.org/en/instruments-mechanisms/instruments/convention-rights-child>

<sup>3</sup> <https://www.legislation.gov.uk/mwa/2011/2/contents>

belief that currently, they **appear not to be fully realised by all young people across Wales.**

### **Methodology:**

We held an online workshop with young people who had expressed an interest in sharing their lived experience with us of ‘the missing middle’. We heard from eight young people in total, seven attended on the day with another young person contributing via email. They **shared openly and honestly** the responses they had received having reached out for help with their mental health.

Each young person is a Welsh member of our **Youth Voice Network** and volunteered their time to inform our work. Their willingness to share their experiences to improve those of others is unwavering, as is our commitment to amplifying their voices. Our gratitude goes out to each of them for their input here.

We are also grateful to colleagues at Mind Cymru and across our federation, who we liaised closely with to **ensure our understanding of the new service model** and experiences of both practitioners and young people accessing the service.

### **Key messages from young people:**

- Despite many initiatives **young people are still not getting the support they need when they need it;**
- This leaves young people feeling **isolated and hopeless, reluctant to seek support in the future** and worried they will experience **stigma and discrimination.**
- Whilst it is positive that young people can access school-based support, there is **still work to be done to ensure this includes a range of care with sufficient capacity** to meet the needs of the individual young person.

## What we heard:

### 1. Support at school

We know that **education settings are a vital opportunity to ensure universal access to mental health knowledge and support** for every child or young person across Wales. Welsh Government's recent legislative reform of the curriculum<sup>4</sup> acknowledged the **essential relationship between pupils' mental health and their ability to achieve their full potential**. Having the confidence and ability to put into words how you're feeling and ask for help is undoubtedly a life skill we all wish for our children, and whilst an awareness of the importance of good mental health and looking after our wellbeing is increasing, the provision of support for young people alongside this, must develop at the same pace.

Young people were keen to share their experiences of mental health support at school with us as part of our workshop, confirming that, for these young people at least, another of Wales' legislative commitments, aimed at ensuring access to independent counselling provision<sup>5</sup>, is in place for secondary school aged children and being accessed. However, it seems that there are **a few elements to its current set-up that fall short of meeting their needs:**

“ In Year 12, I had sessions from my school counsellor but they were short and it felt like it was rushed and I wasn't being listened to. It felt frustrating and isolating as I struggled a lot from the transition of GCSEs to A Levels and felt I needed support but wasn't able to receive it. ”

#### Young people shared several frustrations with us:

- **Difficulty accessing counsellors** to begin with;
- Once the support was in place, **a limited number of sessions** were offered, most of which **failed to meet the young people's needs**;
- An awareness of the **levels of demand** for this service amongst both the young person and the counsellor also meant that **access to provision quickly discontinued** if they failed to attend an appointment.

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<sup>4</sup> <https://www.legislation.gov.uk/asc/2021/4/part/6/crossheading/mental-health-and-emotional-wellbeing/2021-11-23/data.xht?view=snippet&wrap=true>

<sup>5</sup> <https://law.gov.wales/school-standards-and-organisation-wales-act-2013>

From the lived experiences of young people, it appears that whilst **valued**, the provision of independent counselling in its current format may be **restricted by service-level limitations** and therefore **not as effective in meeting the needs** of young people as a result.

“ I was quite depressed for a long time in school and although I had a counsellor, I don't think it was very effective. I was not considered severe to be referred to more professional help. ”

Without the ability to adapt to young people's needs, and **offer a wider package of support**, independent counselling provision appears to operate within **prescribed limitations**, leaving many, if not all the young people we spoke to, **feeling like they still needed help**.

“...I didn't feel like the sessions were enough and my anxiety started getting worse, that was exacerbated by the pandemic. but I couldn't get support from CAMHS. I felt really isolated during that time and I felt alone and it was a really bad time for me ”.

## 2. Young people feel there's often nowhere else to go

With the conception of the term 'missing middle' first coined by the Children, Young People and Education Committee in 2018<sup>6</sup>, has come the understanding and acknowledgment that **not all young people will need specialist support** for their mental health. With this in mind, **a whole range of provision should be available to them** at the earliest point, providing the **flexibility and choice** needed to tailor an appropriate response and meet their **individual needs**.

However, it appears from the lived experience shared with us recently that there's **still a long way to go to achieve this**:

“ It can be quite frustrating as you're unsure where to turn next after general services. Worrisome because you don't know if you

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<sup>6</sup> <https://senedd.wales/media/jr4oyh4p/cr-ld11522-e.pdf>

qualify for more specialist services because you're not 'poorly' enough <sup>☞</sup>.

Whilst we recognise that the young people engaged in our workshop had signed up because of their experiences of 'the missing middle', what they shared with us provides a **bleak update on the availability of further support** within this space.

Young people described how they felt they had **nowhere else to go, once support at school had ended**, despite their continued mental health needs:

☞ Still left not knowing how to deal with anxiety. Advice to go to GP which I did. Nothing else to help. Almost left me to deteriorate further which could have been prevented. Place in the middle where you need extra support but there's no services or signposting. No space where I felt comfortable to go. <sup>☞</sup>

Many young people outlined why **provision at this point is so important**. Their reasons included the need for **parity** between mental health and physical health services, delineating that physical health interventions are:

☞...put in place to prevent the progression of problems rather than waiting until someone is on the bottom line to qualify for treatment <sup>☞</sup>.

Another young person shared their view that:

☞...offering treatment so late into disorders/difficulty...means it takes individuals long to recover/benefit from support. Therefore, by intervening early it means less treatment may be required <sup>☞</sup>.

Young people sharing their lived experiences here reminds us that **what they are asking for isn't an intensely specialist level of mental health support**, but provision that might just **tackle their particular distress before it escalates**. One young person described their recent need to access provision in this space due to them experiencing a slight blip in their therapeutic journey, yet nothing that warranted accessing specialist support. They went on to suggest that accessing provision at these points in your life:

☞...can give you that little push you need to get stable again<sup>☞</sup>.

### 3. This all comes at a personal cost for young people

What has been profoundly highlighted by our engagement work with young people is the **personal cost** not getting this right for them is having.

Many of our young people reported feeling that their **needs hadn't been taken seriously**, leaving them **isolated** and experiencing **feelings of hopelessness**. They believe that the consequences of this lack of improvement at pace means that **their mental health has unnecessarily deteriorated**:

“...The feeling of invalidation leads to worsening of your struggles and spirals out of control and often professionals don't have the time and that can come across as not being taken seriously or listened to then it makes you feel like you're in a never ending vicious circle”.

“ I felt like I wasn't unwell enough to receive the support I needed but was too bad to receive the baseline support that was being offered. It made me feel alone and like a burden. On top of this I feel like this made my anxiety worst as I felt I was making a big deal out of nothing as I didn't "qualify" for help”.

Many young people engaged in this workshop, sadly **agreed with these contributions** and described **questioning their self-worth** and **feeling very alone** as a result. They also outlined the impact experiencing this was having on their **likelihood of reaching out for mental health support in future**. There appeared to be an **air of reluctance to engage with services**, regardless of any deterioration in their mental health. This is **significant learning for us all**.

The heightened awareness young people have around **thresholds for specialist mental health support** and this being the reason they are unable to receive further support only exacerbates this, leading them to **resort to self-help**, which inevitably **comes with risk**.

**Researching online** was something many young people felt compelled to do, given the lack of further support. Consequently, this involves **repeating their experiences multiple times** and comes with the risk that the support they're accessing **may not be helpful nor appropriate**:

“...I started to find content that wasn’t helpful to my mental health and made me worse. I tried to help myself but it made me worse”.

It was also noted that trying to find resources for self-help can be **extremely tiresome** when you’re poorly:

“ You don’t always feel like you can search help on your own because you’re not in the right mindset”.

Worryingly we heard young people describing the continued **stigma** around accessing services as a major barrier for them. Young people are **prevented from seeking the support they need** because services are not set up in a way that encourages access and in turn, they are instead reliant on friends to help give them the **encouragement they need** to reach out for help.

“I also worry if accessing specialist services could be seen by future employers or educators and that could reflect negatively on potential job applications”

“ I worried about that too and whether there would be any stigma with accessing mental health help.”

“ I don't know if accessing specialist support will show up on my GP record and that could affect future job and education applications. I don't want using such services to reflect negatively on me”.

Despite the **advancement in breaking down barriers** around mental health in the last couple of years, especially following the Covid-19 pandemic, **mental health stigma appears to remain prevalent**, and a problem faced by many young people in Wales.

## Key findings from local Minds’ service model:

### Programme summary:

Funded by Mind during 2023-2025, the Missing Middle service model uses Mind’s **guided self-help** programme, adapted for younger people. This model has been

designed as a **tier 1 / step 2 intervention** and fits within the National Institute for Health and Care Excellent (NICE) guidelines for guided self-help<sup>7</sup>.

The model is designed as an **early intervention service for young people aged 11 – 18 years old with mild to moderate mental health problems**. It can be provided without the need for a formal diagnosis. It can also **support young people who are on a waiting list** for services to prevent their problems from worsening.

Mind Cymru recruited three Welsh local Mind partners to deliver the **free, six-week, guided self-help service** within their communities. The model aims to equip young people with the knowledge and skills to **understand, protect and improve their mental health**.

The support provided isn't counselling or cognitive behavioural therapy (CBT) but is **delivered by trained mental health professionals who draw on counselling skills and CBT tools**, as well as other resources as part of a **bespoke package of support**.

Each young person receives up to **5 x 20-minute one-to-one sessions** with a **trained local Mind practitioner** to create a **wellbeing toolkit** which includes evidence-based tools. Young people can **choose to bring a trusted adult with them** to the sessions if they wish. An optional 'getting to know you' session is also offered as needed.

The wellbeing toolkit is **unique to the individual** and contains a **range of tools and resources designed around the young person's needs**. In addition to supporting common mental health problems, the service can provide content to support with the following topics:

1. About **anger**
2. Coping with **loss**
3. Coping with **stressful and anxious feelings**
4. Feeling **lonely**

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<sup>7</sup> <https://www.nice.org.uk/guidance/hte3>

## 5. Low mood

## 6. Positive self-talk

Young people can use the strategies that they've learnt and the tools and resources **beyond the duration of the intervention.**

### Programme evaluation:

The programme worked with **500 young people** and was the **first of its kind** to evaluate the impact of supported self-help for children and young people. The **most frequently accessed topics for support** were anxiety (52%), anger (23%) and low mood (17%). and the service displayed a range of positive outcomes:

Most young people reported experiencing **improvements** to their **mental health symptoms** (for example, anxiety), a greater awareness of how to **manage their symptoms**, and a **better understanding** of their symptoms from accessing the service.

“It did help me with my anxiety. Quite a lot”

“Yes, I got a much better understanding of what is happening as before I felt as if I was going crazy”.

Most notably:

- **71% of young people experienced improvements to their mental wellbeing** while attending the service
- **63% of young people experienced improvements to emotional and behavioural difficulties** while attending the service
- **100% of young people would recommend** the service to family or friends.

The programme also uncovered the following findings, many of which relate to the experiences of the young people we engaged with:

- There is a **high level of need** for support for young people with mild to moderate mental health symptoms
- Many young people would try to **manage their symptoms on their own** if this programme didn't exist

- **Schools are shown to be the most effective referral pathway** into the service
- The **supportive practitioners** put young people at ease
- The **tools and resources** included in the wellbeing toolkit help young people to manage their mental health.

## How these findings specifically relate to what we heard from young people:

Diving deeper into the service evaluation report<sup>8</sup>, it appears that Mind's missing middle service model could **help address the key messages** we heard from young people.

Overall **outcome measures** have shown that young people utilising the service were likely to see a **positive impact** on their mental health and wellbeing. The programme **provides a beneficial service** for young people whose **needs would likely otherwise be unmet**.

**Partnership working between schools and local Minds** has been particularly effective, resulting in this referral pathway providing the smoothest and most utilised route to support. Given that the most frequent referral pathway into the service was schools, could suggest that this service model **offers an alternative service that could easily dovetail school-based support** and allow for a range of care to be accessed by young people. This could also support an **increase in the capacity** of school-based support, whilst offering young people choice, which is so very often what they ask for<sup>9</sup>.

Just over half (56%) of young people were **referred to another service** by their local Mind practitioner. This suggests that whilst the service did have a positive impact on the young people who accessed it, there was also the acknowledgement that **further support could be made available** in order to continue to support that young person. Whilst not every young person would need this, the offer being there is **an important step that provides reassurance** that help can continue to be accessed.

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<sup>8</sup> Website link

<sup>9</sup> <https://www.mind.org.uk/media/8575/mind-20582-trying-to-connect-report-aw2-welsh-recommendations-lr.pdf>

**Onward referrals and signposting** were rarely into a CAMHS or specialist service, most were to **community-based support** delivered by the local Mind or another organisation. This is supported by the referral leads the evaluation we spoke to who were **positive about the impact of the programme** and saw this as an important addition alongside school-based counselling.

Referral leads also told us that the service is particularly important for young people who may **prefer to access support away from their school**, which may reflect the concerns about **stigma** that the young people raised with us.

Service Managers observed several benefits to young people from taking part. These included appearing to have good **mental health after attending**, gaining a **sense of perspective** and more **positive outlook**, feeling **less alone**, being more likely to **social groups**, and an increased **understanding that support exists**. These all tackle the feelings of hopelessness and isolation that they young people we spoke to highlighted in their own experiences of searching for help. The service was also able to **provide support quickly**, meaning young people did not have to wait.

“ Some of the feedback we've had from young people is they're not alone. It's not wrong for them to think the way that they're thinking. That there is support out there that they can access. ” (Service Manager)

Referral leads also highlighted the **importance** of this support for **young people who wouldn't have qualified for support from SCAMHS** (also known as the 'Missing Middle').

“ Sometimes it's like they need that lower level than CAMHS. So, coming to us and having that availability through Mind is really helpful. ” (SCAMHS referral lead)

Many of the young people we spoke to told us that if this service didn't exist, they wouldn't have sought support elsewhere and would have tried to **manage their symptoms on their own**. This indicates the importance of the service to prevent mental health problems from escalating.

“ [I would have done] nothing but my anxiety would have been worse without the help provided ” (Young person)

“ I probably would have just tried to deal with my anxiety as best as I can on my own ” (Young person)

“ Suffered in silence [if this service didn't exist] ” (Young person)

Service Managers shared examples of how the Missing Middle has taken the **pressure off school-counselling** and **GP practices**.

“ A lot the schools that we were in partnership with, it takes the pressure off because then their school counselling waiting list isn't as long if they refer to us directly. Those types of things, so that's always quite good to hear. ” (Service Manager)

We heard that the content within the **wellbeing toolkit** helps young people to **manage their symptoms**. This includes learning strategies such as grounding techniques and coping skills. The worksheets also help young people gain a sense of perspective and feel less alone.

Young people told us that the wellbeing toolkit covers a **range of relevant and useful topics** and **activities in an easy-to-understand** way. Being able to **pick and choose** from these and use at their **own pace or with the practitioner** are also seen as positives. By **co-producing the toolkits** with young people the service provided an opportunity for the young person themselves to **work through what would best work for them**. This ensured their **voice was heard** and they had **control** over how to be best supported.

### What we think needs to happen next:

- Welsh Government should develop a **clear strategic response** to rising mental health need among children and young people by prioritising their needs.
- Welsh Government must ensure that **young people directly shape new mental health services**, as described in the new Mental Health Strategy (**Open Access care**). This is a **real opportunity** to ensure we get things right for them, as well as to learn from provision already delivered, such as our Missing Middle programme.
- Welsh Government should consider developing a **targeted programme** with the aim of **tackling mental health stigma within schools** and supporting

professionals that work with children and young people both in educational and health care settings.

- Welsh Government must **enhance school-based mental health support** to ensure it **meets young people's needs**, and forms part of a wider **package of care**.

## About Mind Cymru

We're Mind Cymru, the mental health charity. We work nationally and locally.

Nationally, we campaign to raise awareness, promote understanding and drive change. We're also the first point of call for information and advice, providing mental health information to people in Wales over a million times every year. Locally, in communities across Wales, independent local Minds provided life-changing face-to-face support to more than 37,000 people last year.

Together, we won't give up until everyone experiencing a mental health problem gets support and respect.

## What Support do we offer?

- Our [network of 16 local Minds](#) across Wales provide a variety of different services to over 396,000 people. Each local Mind is unique, and support may include talking therapies, peer support, advocacy, crisis care, employment and housing support. You can find your local Mind [here](#).
- [Mind's Infoline \(0300 123 3393\)](#) provides an information and signposting service. It is open from 9am to 6pm, Monday to Friday (except for bank holidays). You can speak to a trained advisor about:
  - Mental health problems
  - Where to get help near you
  - Treatment options
  - Advocacy services
- We also have lots of resources on our [website](#). You might find our [mental health A-Z](#) useful.

For further information on the content of this briefing, please contact [n.evans@mind.org.uk](mailto:n.evans@mind.org.uk).