Dear ,

Please find below a briefing from Change Mental Health ahead of this Thursday's debate on motion S6M-14408 submitted by Tim Eagle MSP - 'Improving Access to Health and Social Care in Rural Scotland'. Our briefing contains key information and asks on mental health policy to help address challenges faced across rural Scotland.

For further information on any aspect of this briefing paper, please contact:
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Who We Are
For over 50 years, Change Mental Health has provided transformational support for people – ensuring that everyone has access to the support they need, when they need it and in a way which works best for them. We seek to change society by changing attitudes, fighting stigma and influencing policy to ensure a better quality of life for those affected by mental illness. Our team of over 180 members of staff support over 10,000 people per year in Scotland.

Key Asks:

1) In 2021, the Scottish Government gave a commitment to dedicate 10% of health spending towards mental health services by the end of this Parliament, this stands at just 8.8% now and will lessen if the current proposed Government budget goes through.

   Given rising demand for services and support, we ask parties to back and push for the 10% target to be met.

2) In the last year, our early intervention and prevention services in rural communities across the Highlands, Dumfries & Galloway and Argyll & Bute have supported 3,391 individuals, ranging from accessing the Suicide Bereavement Support Service, Distress Brief Intervention Service and the invaluable Community Link Workers.

   Support needs to be front-loaded to community mental health services to prevent people getting into crisis as well as reduce pressure on acute services. We seek a commitment from Government to support early intervention and prevention services as a priority.

3) The Scottish Government is committed to delivering the Rural Delivery Plan by 2026, to progress development and policy focus on rural areas.

   The National Islands Plan: Implementation Route Map 2024 gives a clear commitment to engaging with the National Rural Mental Health forum for island communities. Change Mental Health would like to see the same commitment enshrined in the Rural Delivery Plan 2026.

Prevention and early intervention saves lives, time and money

a) The Scottish Government and COSLA's Mental Health and Wellbeing Strategy recognises the need for a stronger focus on prevention and early intervention, citing a 2022 study estimating the economic cost of poor mental health to the Scottish economy at £8.8 billion per year.

b) In their September 2023 review of adult mental health, Audit Scotland reiterates the case for effective public investment in preventative healthcare measures yet outlines concerns over limited data and inconsistency in spending categorisation - making it difficult to track total public spending on adult mental health services.

c) Financial analysis from Deloitte in 2022 demonstrated a 'return of investment' of £5 for every £1 spent by employers on effective measures to improve mental health in the workplace.

Main Challenges

Living in a rural community poses unique benefits and challenges for an individual's mental health. Whilst it is true less crowded environments, access to nature and a stronger sense of community may be common factors in rural communities which can improve mental health, challenges do exist. These can include:

1) **Limited access to mental health services**: Audit Scotland in their report on Adult Mental Health services found '*accessing mental healthcare is disproportionately more difficult for some people, including rural communities*.' Rural areas often have fewer mental health resources including fewer mental health professionals and limited access to clinics or hospitals makes seeking assistance more difficult – compounded by challenges in recruitment and retention of staff for statutory services and weaker transport links.

2) **Social isolation:** While rural communities can be close-knit, smaller towns may also be more isolated, leading to feelings of loneliness, especially for individuals who are not well-connected within the community. Whilst some research suggests rural communities on the whole may experience less loneliness than their urban counterparts, other studies

indicate rural experience may vary across different demographics, particularly young women.

3) **Stigma:** Due to their tight-knit nature, people in rural communities may struggle to seek assistance, afraid that knowledge of their mental health condition might become well-known in the community.

4) **Limited opportunities:** Those living in rural areas may have limited access to recreational amenities, narrowing opportunities for social engagement and personal growth. Whilst median gross annual pay for all full-time employees is highest for people living in accessible rural areas, it is lowest for those living in remote rural areas.

5) **Data collection limitations**: There is an active public policy debate surrounding the limitations of the Scottish Index of Multiple Deprivation in rural contexts. Research indicates that area-level measures of deprivation can fail to capture households experiencing disadvantage in rural areas, because 'rural deprivation can be more dispersed in rural areas compared to urban areas'. The Scottish Government is aware of these limitations and are working on improvements.

Change Mental Health in Rural Communities

1) **Suicide Bereavement Support Service – NHS Highland, and Argyll & Bute**
Our service offers free and confidential one-to-one support for anyone who has lost a loved one to suicide in Highland and Argyll & Bute. It's open to people who live in the area, or to people whose loved one died in the area. Support can be delivered over the phone, face to face, or by video call, and is available for as long as it is needed.

   Our specially trained team will help service users navigate the many and complex emotions felt after a suicide as well as taking practical steps such as talking to GPs, the police or the procurator fiscal's office. We can even help organise a funeral. Last year, we supported 101 people in their time of need.

2) **Distress Brief Intervention - NHS Highland, Dumfries & Galloway and Argyll & Bute**
Last year, Change Mental Health supported 2,439 people through this programme. We asked clients about their experiences of receiving support from DBI, with 94% feeling listened to and understood; 81% being able to manage immediate stress and 74% feeling the overall response was better than their previous experiences of distress and stress.

3) **Community Link Worker Service – NHS Highland**
In the last year, we supported 851 people across Highland through this programme of work, across 62 selected GP surgeries – supporting adults over the age of 18 from Caithness to Lochaber and over to Nairn through social prescription. We also work with

surgeries in West Sutherland, Badenoch and Strathspey, Skye and Lochalsh, and the Small Isles.

Referrals are received from the GP to our Community Link Workers when there might be a concern caused by social factors, rather than a medical problem. We're entirely person-centred in our approach, with Community Link Workers working closely on a one-to-one level with service users to build meaningful relationships and keep people well in their community.

4) **National Rural Mental Health Forum**

Change Mental Health established the National Rural Mental Health Forum in 2017 to tackle mental health in communities and workplaces across Scotland. The Forum now has over 270 membership organisations from the third, private and public sectors.

In the past year we've held monthly seminars, attended by over 1000 people from across Scotland, working to build vital resilience in rural Scotland to directly support those experiencing poor mental health. An estimated 500,000 people are reached through the Forum's network across Scotland.

We've also delivered quality mental health training through Rural Connections and Insight into Mental Health to 164 people, as well as working with Police Scotland to develop two separate 'Firearms and Mental Health' leaflets for England + Wales and Scotland. This literature alone has an estimated reach of approximately 623,551 firearms, shotgun and air weapon license holders across the UK (just over 100,000 in Scotland).