

10 November 2023

Mr Richard Leonard MSP
Convener
Public Audit Committee
Scottish Parliament
Edinburgh
EH99 1SP

Dear Convener,

I am writing to you following the Public Audit Committee's work on Audit Scotland's 2023 report into Adult Mental Health. The report recognises that rural communities continue to grapple with a severe shortage of mental health services. As a result, individuals suffering from poor mental health must travel long distances to seek support from outside their designated catchment areas.

As you will be aware, rural Scotland accounts for 98% of the land mass of Scotland and nearly a fifth of the population reside there.¹ Therefore, addressing these inequalities will be vital to improving mental health services.

I would like to share some of our research and expertise on the inequalities facing rural communities when accessing mental healthcare, to help inform your committee work.

Change Mental Health is a national mental health charity that has been supporting people with their mental health for over 50 years across Scotland. We want to change mental health services for the better, to make them more accessible, and to change the stigma surrounding mental health.

We also run the National Rural Mental Health Forum, which is a strong dedicated network of over 230 organisations from third, private and public sectors. Collectively, they reach over 500,000 people in rural Scotland. The Forum drives change to enable people in rural communities to talk openly about their mental health. It creates a solid evidence base for what works to improve people's lives and develops a programme to influence policymakers to channel resources in ways that bring positive change through a network of rural organisations across Scotland.

People in rural Scotland are likely to experience depression, suicidal thoughts and feeling, self-harming behaviour and anxiety – no matter their age, gender or location. They might become isolated, worsened by remoteness, stigma and fear. There must be connection before a mental health crisis occurs, preferably in a low-level, local and non-clinical setting with shorter waiting times and mobile outreach to all parts of Scotland. This is crucial to prevention.

Our research on Marginalised Rural Communities², undertaken during the pandemic in 2021, highlighted the key structural issues facing those in rural communities when accessing mental health services.

Firstly, our research highlighted that rural infrastructure enables good health and wellbeing. Ongoing challenges of isolation and poor mental health in rural communities are the cost of not delivering infrastructure and investment in these areas. Poor public transport infrastructure was cited both as a cause of social isolation and as a specific barrier to accessing mental health services.

Survey respondents in rural areas also highlighted the critical importance of micro-level, 'hyper-local' support to enable mental health and wellbeing. The third sector, and particularly specialist support organisations, are expert at working at this micro-level with individuals and their families. However, to

¹ <https://www.gov.scot/binaries/content/documents/govscot/publications/statistics/2021/02/rural-scotland-key-facts-2021/documents/rural-scotland-key-facts-2021/rural-scotland-key-facts-2021/govscot%3Adocument/rural-scotland-key-facts-2021.pdf>

² <https://changemh.org/wp-content/uploads/2023/02/Marginalised-Rural-Communities.pdf>

continue to be effective, third sector expertise must be recognised and built into policy development, with resources allocated to support individuals and groups where they are.

The theme of 'hyper-local' in the survey responses indicated that local, tailored support was critical to rural communities during the pandemic. Government and Local Authorities should recognise and support community organisations and groups that provide this support, particularly in regions that have large rural areas (such as Highland, Dumfries and Galloway, and the Scottish Borders).

Rural areas, due to their nature, require local and accessible treatments as they often lack in-person mental health treatment. Audit Scotland's 2023 Adult Mental Health Report found that 40% of NHS mental health appointments across Scotland in 2022 were conducted face-to-face³. However, in some rural areas this was much lower. In NHS Borders, 16% of appointments were in person, compared to 29% in NHS Dumfries and Galloway, 9% in NHS Western Isles and only 6% in NHS Orkney⁴.

These themes of 'hyper local' and 'local tailored support' reflect the importance of community link workers when providing support to those suffering from mental illness. This importance is exacerbated in rural communities. Change Mental Health are the lead agency and delivery partner with NHS Highland's Community Link Worker service, working in 29 GP practices across Highland to take referrals directly from GPs and other healthcare professionals.

Rural areas also struggle with a lack of trust and representation between themselves and key health support agencies, specifically in 'hard-to-reach communities. Establishing strong links with community link workers can help broaden engagement and create trust with these communities. Our 2021 Desk Review of Social Prescribing⁵ found that an essential part of successful community link work was a sound and shared knowledge of local assets, organisations and connections. The third sector can play a key role in facilitating this trust, using local knowledge and individual expertise that is difficult to replicate within government health support agencies.

I hope this information is of some assistance to the Public Audit Committee in your work on Adult Mental Health. Please get in touch with us if we can be of any further assistance.

Kind regards,

Aidan

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Change Mental Health

³ https://www.audit-scotland.gov.uk/uploads/docs/report/2023/nr_230913_adult_mental_health.pdf

⁴ Ibid

⁵ <https://changemh.org/wp-content/uploads/2023/02/A-Desk-Review-of-Social-Prescribing.pdf>