

Rural Mental Health

Our conversation starters intend to give community organisations and groups a simple, structured way to discuss subjects and topics related to mental health that have an impact on their work. Conversations should aim to create a safe space where people's contributions and perspectives feel respected and valued without being judged. We suggest:

- Use the discussion starters in small groups of four to eight people
- Set aside 60 minutes of protected time for the conversations
- Begin with a group agreement of how your group will engage together
- Aim to keep contributions relevant and on topic
- Look to identify common ground and develop solutions where appropriate
- Think about how you will use the time effectively. We suggest a few minutes introducing the topic, 20-30 minutes on discussion around the talking points, and leaving 15 to 20 minutes for noting any actions or next steps that can be taken.



Introduction

17% of Scotland's population live in rural and remote areas. Poverty in rural and remote Scotland is a complex issue. Socioeconomic factors like higher costs of living, different employment patterns, limited access to services, healthcare, education, poor public transport and poor digital connectivity can all impact on rural poverty.

Socioeconomic challenges can affect mental wellbeing and lead to higher rates of mental health problems and can be exacerbated by geographical and social isolation in rural communities compared to urban areas.

Those living in farming communities can also face additional economic and environmental challenges which are often out of their control. Poor weather, rising costs and the impact of government policies can create additional financial hardships and stressors affecting wellbeing.

There can be a stigma surrounding both poverty and mental health in rural communities, especially where there is a cultural emphasis placed on self sufficiency, resilience and strength. People talk, and word can travel quickly, making people reluctant to seek help for fear of being judged or ostracised.

Raising awareness and destigmatising poverty and mental health, can breakdown barriers, encouraging individuals to seek help and encourage supportive communities.



Talking Point:

A support worker in rural Scotland is concerned that a client living on their own, in a small rural community is being referred repeatedly to the food bank but is reluctant to engage with wider advice or support offered to them.

When the support worker does a home visit the person is quick to invite the worker inside but when asked about family and friends, or about interests or local activities becomes reserved and distant, and not keen to talk about their circumstances but does say that they are worried about how they are viewed by others.

The support worker has concerns that this cycle would continue unless their personal situation can be improved.



Discussion:

1. What are your initial thoughts about what might be going on in this situation ?
2. If you were the support worker how would you approach the conversation?
3. How does stigma or a reluctance to be seen accessing services impact your community?
4. What ways can your project address stigma and make people feel okay to talk about mental health?



Resources:

[Change Mental Health National Rural Mental Health Forum](#)

A strong dedicated network driving change to enable rural people to be open about their mental health

[Mental Health Foundation Publication: Supporting Farming communities at times of uncertainty](#)

