

Proposal

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Health care problem and target audience

There is a rural divide in mental healthcare and these issues are particularly acute in the three most rural Health Boards: NHS Borders, Dumfries & Galloway and Highland¹.

Prescription levels of drugs for anxiety, depression and psychosis are known to be rising and there are systematic differences based on deprivation level. Professionals used to working in urban centres may be unsure whether these challenges are as relevant in rural areas.

Research question: Do levels of prescription of drugs for anxiety, depression and psychosis differ between Scotland as a whole and the rural Health Boards of NHS Borders, Dumfries & Galloway and Highland, over time and by deprivation level?

Target audience: Medical and allied professionals moving to these rural Health Boards.

Data to be used

The data to be used will be from the ScotPHO Health & Wellbeing dataset ‘Population prescribed drugs for anxiety, depression and psychosis’.

Variables of interest:

- Area name
- Year
- Scottish Index of Multiple Deprivation (SIMD) quintile
- Percentage of Population prescribed drugs for anxiety/depression/psychosis with confidence interval (Wilson’s method)

Planned data visualisations

Following Tufte, and keeping the professional audience in mind, the focus will be on clear, accurate presentation of all available data.

- Percentage of total, change over time by area: Comparison of Scotland as a whole, NHS Borders, Dumfries & Galloway and Highland total percentage over time with confidence intervals (point and line plot with error bars)
- Percentage of quintile by NHS Board by time: visualisation of the interaction between level of deprivation and NHS Board in prescribing levels over time (presented as a grid of clustered bar charts with error bars)

¹E.g. https://changemh.org/latest_news/the-rural-divide-camhs-in-scotland/