

## COUNTRYSIDE ALLIANCE BRIEFING NOTE: HEALTHCARE IN RURAL AREAS

Westminster Hall, Blake Stevenson MP

Wednesday 04 March 2026

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- **Countryside Alliance support for a forthcoming report on rural poverty by the Labour Rural Research Group and an earlier Environment, Food and Rural Affairs Committee inquiry into rural mental health have helped highlight barriers to effective and comprehensive healthcare provision in rural areas.**
- **Challenges have been found to include relatively older populations in rural areas, funding challenges, the accessibility of services in remote areas, poor connectivity and mental health challenges associated with isolation and loneliness.**
- **Our own mental health survey, which concluded in 2022, uncovered significant evidence of concern both about rural mental health in general and NHS provision of help to those who need it. Areas highlighted especially include the provision, visibility and funding for services in areas of sparser population.**
- **We identified a degree of despondency at contemporary attitudes towards rural life that numerous respondents found alien to the realities of the countryside, particularly on the part of those abused online associated with their participation in traditional rural pursuits.**
- **Healthcare provision must be tailored to the needs of local communities, with factors including service provision, visibility and funding taken into account. This is particularly true given the strong preference our survey uncovered for services delivered in person, as opposed to by remote technological means, which may in any case be less viable because of the rural connectivity gap.**

### Background

- The Countryside Alliance has recently been working with the Labour Rural Research Group on a forthcoming report on rural poverty. The report will focus on the government's recently published Indices of Deprivation in Rural Areas (October 2025), highlighting methodological issues that make difficult the proper identification and measurement of poverty and deprivation in rural areas.
- The indices include the domains of Health & Disability – access to quality health and care services, social isolation and mental health – and Barriers to Services – access to GP surgery, primary schools, food store, and post offices; car availability, provision, and frequency of public transport, the costs of both transport and service use; digital connectivity and availability of entertainment/public activity.<sup>1</sup> Both are relevant to this debate.

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<sup>1</sup> Labour Rural Research Group, [Rural Poverty: Our next report](#)

- Our response to the consultation focused on mental health, drawing from evidence we gathered in support of an Environment, Food and Rural Affairs Committee Inquiry that concluded in June 2022.<sup>2</sup>
- In response to a parliamentary question last Tuesday (24 February), the Health Secretary, Wes Streeting MP, outlined the government’s position:

*“This Government are restoring the founding promise of the national health service: to bring quality healthcare to all, regardless of how much they earn or where they live. New funding for GPs is being prioritised for areas where the need is greatest, and we are sending more cancer specialists to rural hospitals. As we modernise the health service, the NHS app and NHS Online will bring world-class healthcare to the most remote corners of our country at the touch of a button—lots done, and lots more to do.”*

- However, Helen Morgan MP (North Shropshire, LD) said that in her constituency there were 158,000 patients who had waited more than one month for a GP appointment, and 50 fewer qualified GPs than there were a decade ago.<sup>3</sup>

### **Barriers to healthcare accessibility**

- In 2019 the House of Lords Select Committee on the Rural Economy considered rural health services as part of its inquiry into the rural economy. Its report identified challenges to rural healthcare as including:
  - Older populations, with the average age of the population in rural areas being nearly six years higher than that of urban areas and nearly a quarter of the rural population being aged over 65, with the number of over-65s increasing much more sharply in rural areas (37% between 2001 and 2015) than in urban areas (17%).
  - Funding challenges, quoting the Rural Services Network that rural areas were receiving slightly less funding per resident under NHS allocations, despite their older populations.
  - Access to services, owing to the remoteness of some populations making access to health services more difficult and with community transport schemes unable to respond at short notice to assist all patients in need of transport.
  - Poor connectivity preventing technological solutions to some of the challenges in rural healthcare provision.
  - Issues of isolation, loneliness and associated challenges to mental health.<sup>4</sup>
- Difficulties with transportation in rural areas were further highlighted by Countryside Alliance research from 2022 that showed that rural households spend almost £800 a year more on fuel than people who live in urban areas. Defra research also suggested rural life necessitates longer journeys by private transport, with an average travelling distance per resident at 5,767 miles in 2020, compared with 3,624 miles for urban dwellers and 4,334 miles across England as a whole.<sup>5</sup>
- Other issues we know to be affecting many rural residents, particularly in remote communities, are ambulance response times and the availability of care home places, which in turn affect the availability of hospital beds.

<sup>2</sup> Countryside Alliance, [Commons committee publishes Alliance mental health research](#), 21.06.22

<sup>3</sup> HC Deb, 24.02.26, [v781](#)

<sup>4</sup> House of Lords Library, [Health care in rural areas](#), 17.02.23

<sup>5</sup> Countryside Alliance, [Parliamentary group highlights ‘rural premium’](#), 28.04.23

- These challenges mean apportioning resources across the country on a strictly numerical basis would inevitably lead to rural areas being left behind.

### **Mental health and healthcare**

- The survey we conducted on mental health challenges in rural areas in support of an EFRA Committee inquiry ran over Christmas 2021-22 and saw over 700 people take the time to inform us, anonymously, of their experiences and impressions of mental health issues within rural communities across over 1,700 written comments.
- It uncovered significant evidence of concern both about rural mental health in general and NHS provision of help to those who need it. Areas highlighted especially include the provision, visibility and funding for services in areas of sparser population.
- The survey invited responses both from those with and without direct experiences of mental health and healthcare services available in their community, because people are far less inclined to seek help if they are not convinced it will be forthcoming.
- We were keen to understand the key drivers of mental ill-health in rural communities. Understandably, the coronavirus pandemic loomed large; many respondents focused on the enforced curtailment of community and social life that was imposed as part of attempts to limit infection.
- More subtly, we also found a degree of despondency at contemporary attitudes towards rural life that numerous respondents found alien to the realities of the countryside. The 30% who reported having suffered harassment, often on social media, for supporting country sports were acutely affected.

### **Countryside Alliance position**

- Healthcare provision must be tailored to the needs of local communities, with factors including service provision, visibility and funding taken into account. This is particularly true given the strong preference our mental health survey uncovered for services delivered in person, as opposed to by remote technological means, which may in any case be less viable because of the rural connectivity gap.
- Government policy must recognise that the inadequacies of the public transport network in many rural communities makes the use of private transport essential, both in residents' everyday lives and as they seek to access services including healthcare.
- We have continually pressed governments to reflect this reality in fiscal policy, for example with reference to fuel duty and current proposals for a new electric Vehicle Excise Duty.

### **For more information please contact:**

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