Advancing Place-Based Supportive Oncology to tackle rural and coastal cancer inequities and deprivation

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Background

- The Multinational Association of Supportive Care in Cancer (MASCC) define **supportive oncology as a multidisciplinary group of health professionals involved in the prevention and management of physical and psychological symptoms and side effects across the cancer disease continuum.**

- Globally and in the UK, **many people live in rural and coastal areas** (Fig 1 and Table 1), and it is widely acknowledged that **cancer inequalities exist between rural, remote, coastal and urban communities** and we may need different approaches to deprivation in different places.

- The inequalities include **limited access to supportive oncology services for people living in resource-limited rural or coastal areas**, when compared to urban counterparts.

- National and devolved **cancer policies give inadequate consideration to the challenges of living with or caring for cancer in rural and coastal settings.**

- There is now a growing body of research that explores the impact of place of residence on supportive oncology and cancer outcomes more widely. **However, this has not translated into the formal recognition of "place-based supportive oncology" as an established domain within cancer care and cancer research.**

- Drawing on our work in this area **we outline a series of key principles to support the establishment of "place-based supportive oncology" as a scientific field of inquiry** as well as to guide future research in this area.

- Our principles are not meant to be definitive and **we invite critical review and collaborative refinement from the wider cancer care and research community.**

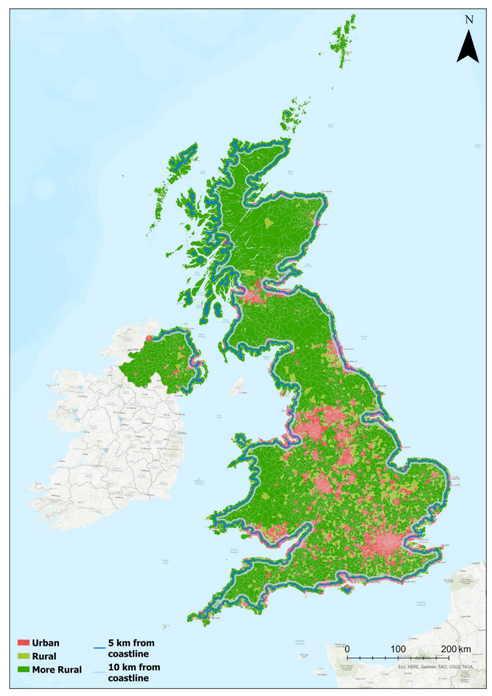

Fig 1: Urban, Rural and Coastal Areas Across the UK

Note: To support comparability across the four nations of the UK the UK Composite Rural Urban 3-fold Classification was used. Coastal areas shown <5km and <10km from the coastline.

Table 1: Estimates of the Rural and Coastal Populations Across the UK

Nation	Rural Population	Coastal Population
England	~10 million people live in rural areas (17% of population)	12.3 million (22% of population)
Northern Ireland	~670,000 (36% of population)	~760,000 (40% of population)
Wales	~1,022,000 (32% of population)	~1.88 million (60% of population)
Scotland	~930,000 (17% of population)	~2.3 million (41% of population)

Note: Figures are approximate and taken from a range of data sources. Definitions of 'rural' and 'coastal' differ across the four nations. Coastal populations can be classed as both coastal-urban and coastal-rural


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A National Cancer Plan for England: Remember the needs of people in rural and coastal areas

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Key Principles for "Place-based" Supportive Oncology

1. Equity Through Geography
Recognise *"place"* as a structural determinant of cancer care access and outcomes — not just a backdrop, but an explicit driver of inequality.

2. Local Co-Designed Care Models
Involve patients, carers, professional and communities in designing supportive oncology services that reflect community values, identities, and needs.

3. Flexible, Multimodal Delivery
Embrace hybrid models that blend face-to-face, community-based, and telehealth — responsive to infrastructure, digital literacy and connectivity differences.

4. Culturally and Contextually Tailored Interventions
Address the cultural and social context of rural, coastal, and urban communities, particularly for marginalised, minority and deprived communities.

5. Embedded Place-Based Research
Prioritise localised, mixed-methods research to capture lived experiences and service gaps.

6. Cross-Sector Integration
Connect supportive oncology with local health, social care, and voluntary sector systems — building networks of trust and continuity.

7. Policy Recognition and Investment
Advocate for formal policy and funding frameworks that acknowledge geographic inequities and support place-based innovation in cancer care.

A Place-based Cancer Equity Research Network

We are in the process of **establishing a place-based cancer equity research network** led by the Lincoln Institute for Rural and Coastal Health at the University of Lincoln.

The network will have **representation across all four nations of the UK.**

If you would be interested in joining or to find out more, please contact Dr David Nelson: dnelson@lincoln.ac.uk

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