# Study links poorer health in coastal constituencies to rising support for Reform UK



A recent study by Imperial College London suggests a compelling link between poorer health and voting patterns, particularly pointing to Reform UK as the party attracting more support from constituencies with higher incidences of health challenges. Analysis of the 2024 general election revealed that Reform UK secured 14.3% of the vote and won five seats, three of which were in the most deprived fifth of the country. These constituencies also had populations with notable health disparities, including higher rates of chronic illnesses such as asthma, chronic obstructive pulmonary disease (COPD), coronary heart disease, dementia, depression, diabetes, and obesity.

The research, published in BMJ Open Respiratory Research, highlighted that Reform UK areas had significantly higher prevalence rates for conditions like asthma (7.44% versus 6.58% in Labour areas) and COPD (2.85% versus 1.99% in Labour areas). Coronary heart disease and depression were also more prevalent in Reform constituencies compared to Conservative and Liberal Democrat regions, respectively. The strongest associations between support for Reform and specific health conditions were found with obesity, COPD, and epilepsy.

Researchers interpreted these findings as reflecting broader socio-political dynamics seen elsewhere. They drew parallels with studies from the United States, where poorer healthcare outcomes correlate with Republican voting, and from Italy, where dissatisfaction with public services fuels far-right support. In the UK context, the closure of local healthcare facilities has been linked to decreased patient satisfaction and increased backing for populist right parties. Lung health, in particular, appears influenced by health inequality, with conditions causing breathlessness potentially shaping voting behaviour.

The study team noted that austerity policies in the UK, compounded by the Covid-19 pandemic, have exacerbated gaps in healthcare provision, particularly affecting those with long-term lung conditions. Inadequate housing—cold or damp homes—further worsens health outcomes by increasing risks of acute exacerbations and hospitalisations. These factors together contribute to a sense of frustration with the established political order, which may drive support for parties promising change.

Geographically, three of the five Reform UK constituencies are coastal areas characterised by older, poorer populations with more chronic health conditions, aligning with the demographic and social risk factors identified. The interplay of physical and mental health difficulties also appears to influence political alignment, supporting the notion that health disparities are entwined with broader social discontent that populist movements can capitalise on.

While Reform UK has yet to comment on the study, a spokesperson from the Department of Health and Social Care responded by emphasising government efforts to recover the NHS after a prolonged period of decline. Initiatives cited include delivering additional appointments, reducing waiting lists, recruiting more general practitioners, and investing an additional £26 billion to modernise health services and increase patient control.

This study sits within a growing body of evidence underscoring health inequalities as a significant factor contributing to social and political divides. Other research from Imperial College highlights widening gaps in heart disease mortality between rich and poor, with the most deprived areas seeing smaller improvements over decades. Additionally, nearly 15% of people in England live with multiple long-term health conditions, requiring comprehensive healthcare approaches. Socioeconomic disparities are also evident in blood pressure management and healthcare access among adolescents and children, with ethnic minority and impoverished groups facing higher risks of adverse outcomes.

Together, these findings paint a picture of health inequities shaping lived experiences and political landscapes, where poorer health and limited access to services correlate with shifting electoral loyalties, particularly towards populist parties promising reform.

### 📌 Reference Map:

* Paragraph 1 – [[1]](https://www.irishnews.com/news/uk/people-in-poorer-health-more-likely-to-vote-reform-uk-4ND2JEAVRBLWLIXD7KTMOCHG54/), [[2]](https://www.imperial.ac.uk/news/269913/poorer-health-linked-more-votes-reform)
* Paragraph 2 – [[1]](https://www.irishnews.com/news/uk/people-in-poorer-health-more-likely-to-vote-reform-uk-4ND2JEAVRBLWLIXD7KTMOCHG54/), [[2]](https://www.imperial.ac.uk/news/269913/poorer-health-linked-more-votes-reform)
* Paragraph 3 – [[1]](https://www.irishnews.com/news/uk/people-in-poorer-health-more-likely-to-vote-reform-uk-4ND2JEAVRBLWLIXD7KTMOCHG54/)
* Paragraph 4 – [[1]](https://www.irishnews.com/news/uk/people-in-poorer-health-more-likely-to-vote-reform-uk-4ND2JEAVRBLWLIXD7KTMOCHG54/)
* Paragraph 5 – [[1]](https://www.irishnews.com/news/uk/people-in-poorer-health-more-likely-to-vote-reform-uk-4ND2JEAVRBLWLIXD7KTMOCHG54/)
* Paragraph 6 – [[1]](https://www.irishnews.com/news/uk/people-in-poorer-health-more-likely-to-vote-reform-uk-4ND2JEAVRBLWLIXD7KTMOCHG54/), [[2]](https://www.imperial.ac.uk/news/269913/poorer-health-linked-more-votes-reform)
* Paragraph 7 – [[1]](https://www.irishnews.com/news/uk/people-in-poorer-health-more-likely-to-vote-reform-uk-4ND2JEAVRBLWLIXD7KTMOCHG54/)
* Paragraph 8 – [[1]](https://www.irishnews.com/news/uk/people-in-poorer-health-more-likely-to-vote-reform-uk-4ND2JEAVRBLWLIXD7KTMOCHG54/)
* Paragraph 9 – [[3]](https://www.imperial.ac.uk/news/115810/heart-disease-england-highlights-growing-social/), [[4]](https://www.imperial.ac.uk/news/249937/multiple-longterm-conditions-affect-more-than/), [[5]](https://www.imperial.ac.uk/news/139227/blood-pressure-study-points-more-equitable/), [[6]](https://www.imperial.ac.uk/business-school/ib-knowledge/health/teenagers-and-healthcare-inequality-lessons-policymakers/), [[7]](https://www.imperial.ac.uk/news/266073/ethnic-minority-poorer-children-more-likely/)

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## Bibliography

1. <https://www.irishnews.com/news/uk/people-in-poorer-health-more-likely-to-vote-reform-uk-4ND2JEAVRBLWLIXD7KTMOCHG54/> - Please view link - unable to able to access data
2. <https://www.imperial.ac.uk/news/269913/poorer-health-linked-more-votes-reform> - A study by Imperial College London found that constituencies with higher rates of poor health metrics, such as asthma, COPD, and depression, were more likely to vote for Reform UK in the 2024 general election. The research suggests a link between health inequalities and support for populist right parties, highlighting the impact of health disparities on voting patterns.
3. <https://www.imperial.ac.uk/news/115810/heart-disease-england-highlights-growing-social/> - Research from Imperial College London indicates that the gap in heart disease mortality rates between the wealthiest and poorest communities in England has widened for individuals aged 65 and over. Despite overall declines in heart disease deaths since the 1980s, the most deprived areas have seen smaller reductions, exacerbating social inequalities in health outcomes.
4. <https://www.imperial.ac.uk/news/249937/multiple-longterm-conditions-affect-more-than/> - A study led by Imperial College London reveals that nearly 15% of people in England are living with two or more long-term health conditions. This finding underscores the growing prevalence of multiple long-term conditions (MLTC) and the need for comprehensive healthcare strategies to address this complex health challenge.
5. <https://www.imperial.ac.uk/news/139227/blood-pressure-study-points-more-equitable/> - An Imperial College London study comparing blood pressure management in the US and England found that, overall, there is little difference between the two countries. However, the level of socioeconomic inequality is much higher in the US, with wealthier Americans more likely to meet targets for controlling their blood pressure than poorer patients.
6. <https://www.imperial.ac.uk/business-school/ib-knowledge/health/teenagers-and-healthcare-inequality-lessons-policymakers/> - Research from Imperial College Business School highlights that adolescents from more deprived areas are more likely to suffer from long-term illnesses and disabilities compared to those from more affluent areas. These teenagers are also less likely to use specialist health services and more likely to resort to emergency care, indicating significant healthcare inequalities among young people.
7. <https://www.imperial.ac.uk/news/266073/ethnic-minority-poorer-children-more-likely/> - A study by Imperial College London found that children from ethnic minority backgrounds and those living in more impoverished areas have a higher likelihood of dying in intensive care. The research analysed data on over 160,000 critically ill children and revealed disparities in intensive care outcomes based on ethnicity and socioeconomic status.