Health & Wellbeing Strategy
Fuel Poverty Priority

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Health and Wellbeing Strategy Priorities

- Obesity
- Dementia
- Fuel Poverty
- NEETS
- Smoking
- Alcohol
Why is fuel poverty a priority? (1)

- **Current definition:** When a householder **needs** to spend more than **10%** of their income to **adequately heat their home**

- **Causes of fuel poverty:** energy efficiency of the property; fuel costs; behaviours and knowledge, characteristics; and, household income

- Fuel poverty is a serious problem from **three main perspectives:** poverty, health and well-being and carbon reduction

- **Heat or Eat**
Why is fuel poverty a priority? (2)

- **Cold weather kills.** Living in a cold home has significant implications on the health and wellbeing of residents across our borough, particularly the most vulnerable.

- People with an existing chronic health condition or disability, the very young or older people are **more at risk** from the negative impacts of living in a cold home.

- Children living in cold homes are likely to have **poorer attendance** and **attainment** in school.
# The Private and Social Cost of Premature Death and Illness Related to Cold Homes

Rotherham, 2009/10, £ Million

<table>
<thead>
<tr>
<th></th>
<th>Premature Death</th>
<th>Cardiovascular Illness</th>
<th>Respiratory Illness</th>
<th>Falls at Home</th>
<th>Common Mental Disorders</th>
<th>Total Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Loss of Well-Being</strong></td>
<td>£1.600</td>
<td>£1.216</td>
<td>£0.440</td>
<td>£0.686</td>
<td>£5.152</td>
<td>£9.044</td>
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<tr>
<td><strong>NHS Cost</strong></td>
<td></td>
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<td></td>
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<tr>
<td>Secondary Primary</td>
<td>£0.111</td>
<td>£0.258</td>
<td>£0.038</td>
<td>£0.133</td>
<td>£0.399</td>
<td>£0.161</td>
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<tr>
<td>Total NHS Cost</td>
<td>£0.124</td>
<td>£0.279</td>
<td>£0.105</td>
<td>£0.162</td>
<td>£0.560</td>
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<tr>
<td><strong>Social Care Cost</strong></td>
<td>£0.006</td>
<td>£0.012</td>
<td>£0.007</td>
<td>£0.008</td>
<td>£0.103</td>
<td>£0.136</td>
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<tr>
<td><strong>GDP Loss</strong></td>
<td>-</td>
<td>-</td>
<td></td>
<td></td>
<td>£0.453</td>
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</tr>
<tr>
<td><strong>Total Cost</strong></td>
<td>£1.730</td>
<td>£1.507</td>
<td>£0.552</td>
<td>£0.806</td>
<td>£6.268</td>
<td>£10.863</td>
</tr>
</tbody>
</table>

Prepared by Dr Bernard Stafford staffordgh@gmail.com
The Private and Social Cost of Premature Death and Illness Related to Cold Homes

- Source of evidence:
  - English Housing Conditions Survey
  - Mental Health and Housing Conditions in England, National Centre for Housing Research 2010
  - Housing Health and Safety Rating System

- **Economic model** mapping **cold**, **damp** and **mould** to **probability** of **harm**
- Probability of harm further mapped to **economic** and **NHS cost**
- Probable this is an **underestimate** of effect since the model assumes only one **person per dwelling**
Rotherham

- Fuel poverty levels **above** National average
- The rise in fuel prices – energy costs have risen 96% since 2004, or an average of £700 over the same period
- Average of **144** Excess Winter Deaths per year 1990-2010
- **17,800** council properties have been supported through Carbon Energy Reduction Target (CERT)
- **400** council properties have received solid wall insulation through CERT
- **1049** private sector properties have received solid wall insulation through the Community Energy Saving Program (CESP)
- **1,649** non traditional build properties in the borough
- **Green Deal (GD) including Energy Company Obligation (ECO)**
Strategic Objectives

- **Reduce levels of fuel poverty** across the Borough
- Significantly **reduce levels of cold related illness** and **excess winter deaths**
- **All** of Rotherham’s occupied private rented housing stock has an Energy Performance rating of **E** and above
- Target all council stock **not improved** under Decent Homes because of resident choice
- **Raise awareness** of fuel poverty and associated interventions amongst RMBC staff, partner organisations and householders
- Meet vision and ambitions set in the **Rotherham Warmer Homes Strategy (RWHS)**
What do we need to do?

- **Continue** to engage **new and existing stakeholders** through the RWHS
- **Set up and deliver** the Green Deal /Energy Company Obligation framework
- **Continue** to utilise **existing intelligence** and support **development of new research**
- **Raise awareness** of links between **health** and **fuel poverty**
- **Use MECC** as a tool to ensure **more departments / staff raise issues of fuel poverty**
- **Maximise** personal assets, capability and behaviour
- **Adopt a whole systems approach** to reduce levels of fuel poverty
Challenges

- **Causes** of fuel poverty
- Structural and organisational **change**
- **Reliance** of new policy as main vehicle
- **Lack** of engagement and understanding
- Most **vulnerable** and **hard to reach** populations **most likely** to be in fuel poverty
- **Welfare Reform**
- **Climate** impacts
What can the H&WB do?

• Professionals consider the effect of cold on patients / clients and use the principles of MECC to signpost and advise e.g. Willmott Dixon

• Support the use of the Winter Warmth England toolkit [www.winterwarmthengland.co.uk](http://www.winterwarmthengland.co.uk)

• Support **Green Deal** as a RMBC *priority*

• Support and attend the ‘**Warm Well Families Feedback**’ event and ‘**Abacus**’ workshop
Thank you for listening, any questions?

Further details from Catherine Homer

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