



Public Health Wales NHS Trust

Submission to the Equality and Social Justice Committee Inquiry into Fuel poverty and the Warm Homes Programme

Introduction

1. Public Health Wales NHS Trust is pleased to respond to the Equality and Social Justice Committee inquiry regarding fuel poverty and the Warm Homes Programme.
2. This paper provides responses to specific questions raised in the consultation from a public health perspective, providing insights from our recent publication [The importance of household energy efficiency for health and well-being](#) (yn Cymraeg: [Pwysigrwydd effeithlonrwydd ynni mewn cartrefi i iechyd a llesiant pobl](#)) and our recent work on climate change and health.

Public Health Wales

3. Public Health Wales NHS Trust is the national public health institute for Wales. We work to protect and improve health and well-being and reduce health inequalities for the people of Wales. We employ just over 2,200 people throughout Wales, in roles ranging from Consultant Radiologists to Biomedical Scientists, Public Health Practitioners, Epidemiologists and Consultants in Communicable Disease Control.

Consultation Questions

What are the main lessons learned from the Welsh Government's current Warm Homes Programme?

4. Public Health Wales has no comment to make in respect to this question.

How can these lessons help shape the next iteration of the Warm Homes Programme to ensure that it better supports those living in, or at risk of, fuel poverty? In particular:

What should the eligibility criteria for home energy efficiency measures be?

5. In a recent publication on household energy efficiency and health, we reflect on the current status of energy efficiency in housing in Wales, highlighting the great strides that energy efficiency improvements in the social housing sector that have taken, observed through the [Welsh Housing Conditions Survey 2017-18: Energy](#)

Efficiency of Dwellings which indicates that just under half of all social housing has an Energy Performance Certificate (EPC) of C.

6. It is noted, however, that there is a greater variance in owner-occupied and private rented tenures, where just under a quarter of properties have an EPC rating of C and a fifth of private rented properties were recorded as either EPC rating E or F.
7. When considering the energy performance of dwellings according to location, a similar picture is observed between urban and village settings, but hamlets and isolated dwellings have the worst EPC ratings.
8. We know that inefficient home energy can have a detrimental effect on health. The recently published discussion paper on household energy efficiency and health¹ highlights evidence which shows, for instance, how energy efficiency improvements can improve respiratory outcomes for those living with chronic obstructive pulmonary disease (COPD), and inefficiently heated homes can exacerbate the conditions of those living with long-term chronic conditions, terminal illness or weakened immune systems². Public Health Wales is continuing its research on the impacts of living in cold homes in Wales, in particular the links between housing warmth and people's comfort, health and well-being.
9. Inefficient home energy can have a negative impact when it comes to achieving climate change ambitions. Public Health Wales recognises the interconnectedness of climate change and health and well-being. Recent work from Public Health Wales's World Health Organization Collaborating Centre on Investment for Health and Well-being³ highlights the health and wellbeing impacts of climate change, noting that heat risk in homes and buildings is a top priority for action in the next two years, with recommendations including a need to increase incentives for retrofitting existing homes.
10. A report published by Public Health Wales in 2019⁴, exploring winter health impacts, considered that the direct health impact of energy efficiency measures is mixed, with limited evidence in relation to advice on energy efficiency improvements. However, this work found that in the UK, 10% of excess winter deaths can be partly attributed to fuel poverty. Cold homes, that is those under a minimum indoor temperature of 18°C, harm health with residents in the coldest

¹ Public Health Wales 2021a. The importance of household energy efficiency for health and well-being. Cardiff: Public Health Wales NHS Trust. Available at: <https://phwwhocc.co.uk/wp-content/uploads/2021/12/PHW-The-importance-of-household-energy-efficiency-for-health.pdf> (accessed 22/12/2021)

² Marie Curie 2020. The vicious cycle of fuel poverty and terminal illness. London: Marie Curie. Available at: <https://www.mariecurie.org.uk/globalassets/media/documents/policy/policy-publications/2020/fuel-poverty-and-terminal-illness.pdf> (accessed 22/12/2021)

³ Public Health Wales 2021b. Health and wellbeing impacts of climate change [infographic]. Cardiff: Public Health Wales NHS Trust. Available at: <https://phwwhocc.co.uk/wp-content/uploads/2021/11/Climate-Change-infographics-9.pdf> (accessed 22/12/2021)

⁴ Public Health Wales 2019. Improving winter health and well-being and reducing winter pressures in Wales. A preventative approach. Cardiff: Public Health Wales NHS Trust. Available at: <https://phw.nhs.wales/news/winter-health-how-we-can-all-make-a-difference/report/> (accessed 22/12/2021)

quarter of homes having 20% greater risk of winter mortality when compared with those in the warmest quarter. In the UK, around 30% of excess winter mortality is attributable to living in a cold home.

11. Thus, Public Health Wales believes that any eligibility criteria for home energy efficiency measures should maximise the potential for adaptation of energy efficiency measures across all tenures, geographies and the current energy efficiency of the dwelling. To help achieve climate change ambitions, a renewed focus on improving the energy efficiency of private sector residences is to be encouraged, potentially including new forms of support to incentivise home-owners and private landlords to retrofit their dwellings. This should be in conjunction with maintaining and enhancing the existing focus on providing support for energy efficiency adaptations to those on low-incomes and those affected by chronic, long-term health conditions.

Should the area-based approach to tackling fuel poverty (Arbed) continue?

12. We do not have any comment in relation to Arbed in particular, however we would highlight that additional efforts to improve the energy efficiency of dwellings in hamlets and other isolated locations is to be encouraged, as these are noted as having the worst EPC ratings in Wales, with no properties reporting an EPC of C or above. Thus, there should remain a geographical approach to household energy efficiency improvements if we are to meet both net zero ambitions and to improve population health.

What specific support should be made available to meet the challenges associated with rural fuel poverty?

13. As highlighted earlier in this response, the latest data regarding energy efficiency in Wales shows that hamlets and other isolated dwellings have the least efficient properties in Wales. We know also that many rural areas are 'off grid', meaning they are not connected to the same energy infrastructure (such as gas) that are prominent in urban locales, with 'off grid' dwellings reliant on LPG, oil or solid fuel. This can be both costly to individuals and detrimental to climate change ambitions.

How can private sector landlords be encouraged to tackle fuel poverty amongst tenants?

14. Public Health Wales has no specific recommendations to make in relation to this question, other than to reiterate that a renewed focus on improving the energy efficiency of private sector residences is to be encouraged, potentially including new forms of support to incentivise home-owners and private landlords to retrofit their dwellings.

How can any successor scheme(s) better advance equality and social justice considerations?

15. Public Health Wales believes that it is critical for any policy approaches to consider the socio-economic status of potential beneficiaries, in line with the requirements of the socio-economic duty introduced as part of the Equality Act 2010. There is likely to be strong correlation between households living in socio-economic deprivation and poor health outcomes, and these are also likely to be households experiencing fuel poverty, so identifying the particular challenges within these populations will be crucial in ensuring the greatest level of support is provided to those in greatest need.
16. It will be important to continue to monitor fuel poverty in Wales and ensure that any future monitoring reports can be disaggregated according to the Protected Characteristics as outlined in the Equality Act 2010. These are⁵:
- age
 - disability
 - gender reassignment
 - marriage and civil partnership
 - pregnancy and maternity
 - race
 - religion or belief
 - sex
 - sexual orientation
17. Viewing fuel poverty through a socio-economic inequities lens will help to ensure that any emerging issues in relation to levels of fuel poverty that are particularly prominent within a particular population group can be identified and addressed.

How can the Welsh Government ensure that the next iteration of the Warm Homes Programme better aligns with its efforts to decarbonise Welsh housing?

18. One idea to consider may be to focus not just on household income as a criteria for eligibility for decarbonisation adaptations but also to consider the current energy performance of the property, regardless of tenure type or household income. This could accelerate the demand for retrofitting, though such policy approaches should be carefully designed so as not to drive inequities in provision. Failure to incentivise home energy efficiency measures could lead to a stall in efforts to decarbonise Wales' housing stock.

⁵ Equality and Human Rights Commission (n.d.) Protected characteristics [webpage] <https://www.equalityhumanrights.com/en/equality-act/protected-characteristics> (last accessed 04/01/2022)