

"Life doesn't revolve around lighting a fire anymore"

An Evaluation of the Warming Up Project and Recommendations for Future Action





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Campaigning for Warmer Homes



Introduction

The Warming Up Project

Running from January 2003 until December 2004, the Warming Up project aimed to create a capacity within south and east Belfast and Castlereagh that enabled older people to access the support and services they required to achieve affordable warmth. The project supported older people to have their homes made more energy efficient by promoting and facilitating uptake of programmes such as the Warm Homes scheme. By switching from solid fuel heating systems to gas central heating, it is less expensive for older people to heat their homes to the temperatures recommended by the World Health Organisation. Such measures positively impact on overall quality of life and, in the longer term, the health of householders. The project also aimed to reduce the number of older people who received a fire-lighting service from South and East Belfast Health and Social Services Trust (SEBT), and any associated dependence on the service which might perpetuate people within the catchment area living in fuel poverty.

By January 2005, more than 700 people had received energy efficiency information. Eighty five households had energy efficiency measures installed through the Warm Homes scheme and other heating schemes run by the Northern Ireland Housing Executive (NIHE) and Housing Associations. In the process, links between the different partners' organisations, the project and local community, voluntary and statutory service providers were established. The project worker visited more than fifty local groups and organisations, and frontline Trust staff received fuel poverty training. This created a local infrastructure with increased awareness of the issues of fuel poverty and energy efficiency and of the assistance available to older people.

The Structure of the Report

The Project Steering Group agreed to undertake an evaluation of the project and secured resources via the Eastern Area Investing for Health Partnership and the Department for Social Development (DSD). This report contains the outcome of the evaluation, carried out by the Institute of Public Health in Ireland (IPH). The evaluation had a dual focus: (i) to describe the project's outcomes as experienced by both project recipients and members of the project steering group, and (ii) to identify possible ways in which the project and the project's outcomes and learning could be built upon.

The report has six chapters. The first provides background information on the effects of fuel poverty on health and the extent of fuel poverty in Northern Ireland. It outlines the objectives of the evaluation and associated methodology. Chapter two describes the development of the project and the project model, and chapter three explores the main outcomes. Following an initial outline of the current policy context regarding fuel poverty, energy efficiency interventions and health, chapter four discusses the ways in which the project's stakeholders believe the project outcomes could be taken forward. Chapter five presents a scoping exercise outlining the range of potential benefits to organisations from different sectors of locally based energy efficiency interventions. Finally, chapter six provides conclusions and recommendations.

Chapter 1: The Effects and Extent of Fuel Poverty

1.1 What is fuel poverty?

The most widely accepted definition of fuel poverty, and the one applied in the Fuel Poverty Strategy for Northern Ireland, is that fuel poverty occurs for a household when “in order to maintain an acceptable level of temperature throughout the home, it would have to spend more than 10% of its income on all households fuel use”¹. The World Health Organisation’s (WHO)² recommendation for acceptable level of temperatures is 21°C in the living room and 18°C in other occupied rooms for at least 8 hours a day. The British Geriatrics Society, however, recommends that in elderly and infirm households, an indoor temperature of 23°C should be maintained for a minimum of 16 hours a day³.

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NEA⁴ points out that fuel poor households are more likely than others to:

- Pay substantially more than the national average for fuel and energy, possibly combined with having fuel debt.
- Live in a temperature lower than 18°C.
- Be forced to confine waking activities to only one or two rooms.
- Lack sufficient information about energy saving methods or approaches.
- Be unable to afford energy saving items in their homes.
- Lack central heating in their homes.

1.2 The effects of fuel poverty

Shelter from cold and damp is a core condition for human survival. Article 11 of the United Nations International Covenant on Economic Social and Cultural Rights recognises the “right of everyone to an adequate standard of living... including adequate food, clothing and housing”⁵.

The Acheson report on Inequalities in Health⁶ identified links between poor quality housing and health and showed how dampness is associated with increased prevalence of allergic and inflammatory lung diseases such as asthma, independent of smoking. The report makes specific recommendations in terms of energy efficiency improvements, insulation and heating systems in affected houses. Since the Acheson report was published, most government policies on both housing and health recognise an association between poor housing and health.

Health professionals readily accept that there is a link between living in a cold, damp home and ill health⁷. Although these risks apply to all people, the old, children and those who are disabled or have long term illness are especially vulnerable⁸. Specifically, the evidence base links the effects of cold, damp and mouldy houses with:

- Respiratory illness.
- Increased blood pressure and risk of stroke.
- Deterioration of arthritis.
- The risk of accidents at home.
- Social isolation.
- Mental health.
- Adverse effects on children’s education.
- Adverse effects on nutrition⁸.

A range of issues related to living in fuel poverty may indirectly impact upon individual health and quality of life. These include:

- Debt to fuel companies resulting in financial exclusion.
- Disconnection of energy supply.
- Deterioration of the quality of the house.
- Spatial shrink, that is, the householders occupy only those areas they can afford to heat⁹.

“I was stressed from having to carry coal up the stairs. It was kee

According to the Office of National Statistics (ONS), the number of excess winter deaths in the UK in the 2002/03 season was 24,000. Proportionate to population size, this is far in excess of, for example, the Scandinavian countries where the climate is considerably colder¹⁰. Others suggest that every year between 30,000 and 50,000 people, mainly those aged 65 and over, die prematurely during winter^{11, 12}. In Northern Ireland it is estimated that more than 2,000 people die prematurely each winter^{9,13}, and 1360 of them are pensioners¹⁵.

The cost of cold related illnesses to the NHS has been estimated at £1 billion annually¹⁴, and the cost in Northern Ireland is approximately £30 million per year¹⁵. Research in Britain has indicated that the savings to the NHS alone from housing improvement schemes would exceed the annual costs of such improvements¹⁶. For a comprehensive list of the literature on fuel poverty, energy efficiency interventions and health, see Chessire¹⁷.

1.3 Fuel poverty in Northern Ireland

In Northern Ireland, there are currently 203,000 households living in fuel poverty¹³. This is one in three (33.3%) households. This figure is significantly higher than other areas within the UK. In Scotland, it is estimated that 17% of households live in fuel poverty, while the corresponding figure in England is 9%¹.

Based on the 2001 House Condition Survey, the Northern Ireland Housing Executive (NIHE) estimates that of those living in fuel poverty:

- 63% are in the private sector.
- 87% have an annual income of £10,000 or less.
- 66% live in urban areas.

- 50% are above the age of 60¹⁸.

Northern Ireland is a relatively disadvantaged region within the UK⁹. As outlined in Table 1, a higher proportion of people in Northern Ireland are unemployed or dependent on social security benefits than in the UK as a whole. Northern Irish households also have lower average wages.

Table 1: UK levels of employment and income

Factor	Northern Ireland	UK
Employment Rate	69.7%	74.7%
Unemployment Rate	5.4%	5.1%
Average gross weekly household income	£399	£526
Proportion dependent on social security benefits	20%	13%

Source: ONS¹⁹

Northern Ireland has no indigenous sources of gas, oil or coal, which contributes to higher prices of such sources of energy compared with the rest of the UK. Natural gas is currently only available in the Greater Belfast and Larne areas. Generation contracts from the privatisation of electricity has contributed to higher electricity costs. Recent figures for Northern Ireland (October 2004) indicate that householders using natural gas pay 8% less (before Direct Debit discounts) than those using Economy 7²⁰.

Energy inefficiency arises from “a lack of sufficient insulation and inappropriate ventilation, combined with a heating system, which is inefficient or uses an expensive fuel and is thus too expensive for occupants”²¹.



Within Northern Ireland a high proportion of occupied dwellings have Standard Assessment Procedure (SAP) ratings of less than 20, on a scale where 120 equals high energy efficiency and 1 equals the poorest²².

1.4 Levels of fuel poverty in the project area

The catchment area for the Warming Up project was south and east Belfast and Castlereagh. The levels of fuel poverty vary across this area with higher levels in east Belfast compared with the other areas and also higher than in Northern Ireland as a whole.

Table 2 Proportion of households in fuel poverty in the project area

Area	Proportion of households in fuel poverty
East Belfast	44%
South Belfast	29%
Castlereagh	21%
Northern Ireland	33%

Source: NIHE²³

1.5 Evaluation objectives and associated methodology

In February 2004, the Institute of Public Health in Ireland (IPH) was commissioned by NEA NI to carry out an evaluation of the Warming Up project. The evaluation was to be overseen by an evaluation steering group, with representation from the South and East Belfast Trust, NEA NI and the Eastern Area Investing for Health Partnership. Funding for the evaluation was provided by the Eastern Area

Investing for Health Partnership. The Partnership considered an evaluation of the Warming Up project as being a useful means of reviewing the lessons learnt and of highlighting options for further action on unmet needs in the area of fuel poverty, linked to meeting Objective 4 of the Investing for Health Strategy.

The evaluation steering group agreed that the aim of the evaluation would be to assess the project's process and outcomes, as well as exploring opportunities for the future within the current policy environment. The following objectives were identified:

- To assess the extent to which the project has achieved its overall objectives.
- To assess the delivery model applied.
- To investigate attitudes to and experiences of change among older people in relation to heating their homes.
- To identify what the different stakeholders see as the future of the project.
- To identify how representatives from the wider policy making and policy implementation context see the potential and relevance of the project.
- To make recommendations as to how to bring the outcomes of the programme forward.

Since most of the evaluation's objectives are unquantifiable, a qualitative research framework was considered most suitable. Data was collected through:

- Secondary data analysis.
- Individual in-depth interviews (n=23).
- Research seminar with steering group (n=8).

A comprehensive review of policy documents and public strategies regarding fuel poverty was undertaken. Minutes of steering group meetings,

the existing research and the academic literature was also reviewed. This helped develop topic guides for the in-depth interviews. It was initially envisaged that a number of householders would be interviewed before and after interventions in their homes in order to explore their experiences of change. Due to constraints, however, five households who had recently had energy efficient measures installed and five households that were waiting for such measures were interviewed. The householders interviewed were recipients of different programmes including Warm Homes, Warm Homes Plus, NIHE heating conversions and conversions carried out by other housing providers.

Ten stakeholders with direct experience from the programme and five external stakeholders with particular expertise in fuel poverty and policy were also interviewed. Statutory, voluntary, private and community organisations were represented in these interviews. A research seminar with the steering group was carried out mid-way through the project. Participants were invited to discuss the initial findings and to explore how programme outcomes could be taken forward.

All interviews were carried out between August 2003 and December 2003. The interviews were tape-recorded and transcribed. Following established guidelines²⁴, a thematic analysis identified emerging themes. Data validation included *within method triangulation*²⁴, independent data analysis, feedback to interviewees, as well as ensuring transparency at all stages^{25, 26}.

As interviewees were guaranteed full confidentiality, all names and affiliations have been omitted from the quotes below. Quotes deemed sensitive have been omitted. Alterations to the ad verbatim quotes are marked in square brackets.

... wouldn't keep the fire lit. Oh, ... a disaster!"



2.1 Early developments

In 1998, the South and East Belfast Trust (SEBT) approached NEA NI with an idea of developing a project which would improve older people's quality of life by means of tackling fuel poverty in the Trust area. At the time, SEBT spent considerable resources and staff time on fire lighting services for this population group, delivered through a home visiting service by Home Carers, known as "home helps". From the view point of SEBT, a project that reduced the need for this service while providing sustainable solutions for their clients was considered ideal.

An inter-agency group was formed with representatives from a range of organisations from the public, private, community and voluntary sectors. This group was charged with the task of investigating fuel poverty in the area and drawing up a fuel poverty action plan. A draft plan was discussed at a workshop in February 2001. One of the main outcomes was the signalling of interest from those present in taking the issue of energy efficiency forward. Those who expressed such interest subsequently formed a group that set out to tackle fuel poverty and promote energy efficiency within south and east Belfast and Castlereagh. The group was jointly chaired by SEBT and NEA NI.

2.2 Identifying potential barriers in 'hard to reach' clients

The steering group aimed to develop a robust, sustainable model of good practice for tackling energy efficiency in the homes of older people. Similar projects elsewhere have identified that it may be particularly difficult to get this population group engaged in such projects. The steering group therefore sought to identify potential barriers at the outset and to find ways around them.

One of the potential barriers identified was the perception that older people were afraid of losing their home helps. There were expressions of concern from the voluntary sector that the project might be perceived as a way of cutting back on home help services which for some was seen as a valuable social contact. There was also the fear that without a daily visit some older people would experience social isolation, and a feeling of insecurity as to what would happen if they had a fall or became sick:

"One of the reasons why some people would not opt for a change of heating system was because they liked the home help coming in every day on the basis of "if I die somebody will know", and so there is certainly an issue around loneliness and isolation."

To meet this concern, the Trust made clear that their involvement was not about cutting home help services per se, but was a way of using scarce resources more efficiently, and that the use of good heating systems would reduce risks among older people.

"It wasn't just to cut that back. It was about ... the bigger picture."

Another issue that emerged was the perception that a number of SEBT clients seemed to be reluctant to consider switching heating systems because that they preferred their open fire. Concerns about perceived disruption to their homes during the installation of a new heating system were also pointed out as a potential barrier. Furthermore, many older people may perceive applications to government schemes as complex processes that are time consuming and require vast amounts of paperwork. Given such perceptions, it was envisaged that some older people would perhaps be reluctant to get involved:

"It was very cold, I had to put extra clothes on the bed and had to

“For very many people, specifically elderly people, but not exclusively, the very thought of having to do all this negotiation yourself, to complete this paperwork, to engage a fitter, is really upsetting and a number of people would simply have said: I’m not doing that.”

The Warm Homes scheme is designed to be very user friendly, and recipients do not need to engage in complicated paper work or deal with contractors. The perception that they may have to, perhaps based on previous experiences with other schemes, might still, however, mean that some are reluctant to engage.

2.3 Finalising the project model

To address the range of concerns and potential barriers identified, the steering group agreed that a pathway was required whereby anyone referred to the project could be supported right through the process. This would entail support from the point of needs assessment, through the application and installation process and until the householders were able to maintain their new system and understand how it worked. It was agreed that a full-time project worker should be employed to provide this support. A similar process was applied in a local energy efficiency project in the Armagh and Dungannon Health Action Zone and was identified as invaluable to the overall success of the project^{27, 28}.

It was agreed that the project should not be limited to Trust clients but assist all those in the area who were eligible for Warm Homes and heating conversions through the NIHE or other housing providers. By establishing links with a wide range of organisations working in the community, referrals to the project could be made not only from SEBT staff, but from other agencies that were in contact with older

people. The aim was to ensure that resources were maximised and that *“as many people as possible were directed to whichever pot of money was more appropriate”*. A substantial part of the project worker’s duties would be to liaise with community, voluntary and statutory organisations in the area.

Project Aims and Objectives

The project aims to create an infrastructure that enables individuals and groups in the community to access the support and services required to achieve affordable warmth by:

- Developing a social infrastructure, building on existing initiatives to address isolation and social contact issues.
- Creating pathways to inform people how to access services, benefits and community support.
- Developing the existing community infrastructure to encourage community involvement in achieving affordable warmth.
- Promoting coping skills and support mechanisms to allow people to protect and improve their own health.
- Developing local partnerships with organisations relevant to various components of the project such as accessing grants, volunteer networks, community groups, advice agencies, church groups and the local social economy.
- Employing a project worker to develop and implement the project for a period of one year.



A project worker was appointed in January 2003. She left, however, after a short period to return to her previous job, where she continued to work in close association with her successor who took up post in July 2003, and he stayed with the project until it ended in December 2004.

2.4 Challenges in the setting up stage

The process of identifying potential difficulties and solutions took considerable time. Much of this time was spent negotiating the most appropriate pathways. Although some expressed impatience in relation to this, most focused on the benefits of ensuring that the final project model would work.

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“There was a lot of negotiation and talking and there was a lot of time spent before anything practical was being done, but I think the idea was that a) they wanted to get the proper funding and b) they wanted to make sure that they were doing what needed to be done.”

Some of the partners expressed that the period from project initiation to the appointment of a project worker had been too long and could have been avoided:

“There were a lot of people going to a lot of meetings with very little result until the project worker actually came on board... you know it seemed to take a very long time to get funding and the proposal together.”

There was some concern that during this period the momentum dropped and that practical measures could have been put in place to prevent this:

“With the benefit of hindsight I think that had we managed to convince people to engage in

something... maybe a day or two days residential where we discussed the issues [then] I think we would probably have got there sooner.”

Others, however, expressed how the length of time prior to appointing a project worker was necessary to ensure that all partners were equally committed and that expectations were not unduly raised:

“We wanted to determine before we actually started to do any practical work what the common purpose was, why we were all engaged... Now, it took probably a bit longer than it might have done, but I think it was worthwhile investing the time at that particular stage, because the outcome of the practical project then was so much stronger.”

“ I would have done anything to have gotten gas in! My life doesn't

Chapter 3: Project Outcomes

Those interviewed highlighted a number of benefits of the project. The most tangible outcomes were that 85 homes have become warmer and healthier and that more than 700 households have received energy efficiency information. Householders who had energy efficiency measures installed referred to economic outcomes such as benefit and income maximisation, financial savings, reassurance and support. The development of connections on the ground, provision of local training and increased awareness of fuel poverty were outcomes highlighted by project steering group members and external stakeholders.

3.1 Warming Up activities

The project worker was in contact with more than 50 locally based organisations and groups during the project period. This included giving presentations, organising events such as energy efficiency bingo or quizzes, or simply chatting informally to those attending meetings or events. During such visits, the project worker distributed information packs consisting of a temperature card and a leaflet on how to use electricity efficiently, information on the main areas of heat loss in the home and details of the Warm Homes scheme. More than 700 information packs, provided by NIE, were distributed along with 300 energy efficient light bulbs. Information leaflets on the Warm Homes Scheme were distributed through local groups as well as through churches, advice centres and community organisations. Frontline Trust staff received training on fuel poverty issues and on the Warm Homes Scheme. Each of the three Trust teams received a half day training session and information leaflets were delivered to each of the team’s offices. As a result of these activities, 189 people were identified as being eligible for one of the schemes. Of these, 89 were referred by SEBT staff and 100 by various

community groups and organisations, often as a result of a visit from the project worker.

Some 218 intervention measures were installed in the homes of older people. A total of 39 households had gas central heating installed and 67 received insulation measures. A further 28 households had a comprehensive benefit health check, and 69 households received further information about energy efficiency schemes and/or benefit entitlements. The full breakdown of measures is presented in Table 3.

Table 3: Number of households per intervention type

Intervention Type	Number of Households
Warm Homes: Heating and insulation	21
Warm Homes: Heating only	1
Warm Homes: Insulation only	46
Warm Homes: Referred but refused	8
NIHE: Heating conversion	14
NIHE: Referred but refused	3
Housing Associations: Heating conversion	3
Benefit Health Checks	28
Advice and information	69
Did not follow through	8
Did not qualify	10
Refused	7

3.2 Homes warming up

When asked to describe how it was to live in their homes prior to intervention, householders referred to how their indoor climate had affected their well being and quality of life:

“[It was a] disaster for me. I couldn’t keep the house clean or I couldn’t keep the fire lit. Oh, - a disaster!”

’t revolve around lighting a fire anymore.”



"I was stressed from having to carry coal up the stairs. It was keeping everything black... Everyday I was cleaning."

"It was very cold, I had to put extra clothes on the bed and had to put on a woolly jumper and socks going to bed."

Those who had received heating and insulation measures reported great changes to their homes. Some commented that they now had heat throughout their home, which may reduce the effects of 'spatial shrink':

"I'm getting heat all over the house, seven radiators and all the hot water that I want!"

Householders explained how the change in their heating system impacted on the way they felt about their homes:

"I feel great now; it's a different flat altogether!"

The interviewees also expressed that they now had better control over their heat:

"I have it timed to come on from about half past four to about ten thirty at night... If you need it before you can put it on for an hour, two hours or whatever, so that's really good."

Health improvements in conditions associated with fuel poverty, such as heart disease and respiratory illness, may take considerable time to become manifest in an intervention population. Changes in mental health and general well-being, however, tend to emerge much sooner. The recipients in this project did refer to such improvements. For example, one woman explained that after having the new heating system installed she was less worried:

"It was the nerves and depression through the money worry, you know paying the bills so the

nerves are a bit calmer now."

Some made comments which indicate that factors which may have contributed to social isolation no longer need to do so because "life doesn't revolve around lighting a fire anymore".

Those who had yet to have the interventions carried out also emphasised the excessive costs in fuelling their current heating system. One man explained that although he only heated and lived in one room of his house, during winter, his heating costs had been high:

"It was about £220 or £230 a quarter... that is the best part of a thousand a year to heat this room."

Those who had the energy efficiency measures installed highlighted that they made financial savings from their new heating system.

Where appropriate, the project worker signposted householders to agencies who could carry out a benefit check to ensure that people claimed all the benefits to which they were entitled. Several of those interviewed referred to the lack of awareness among older people with regard to their entitlements, and the role of the project worker was seen as crucial to raise such awareness:

"There is definitely [a need for somebody like the project worker] because an awful lot of people don't know half of the things [that they are entitled to]."

For the 28 households that had a full benefit check, the project may have had some impact on household income, which in turn can help reduce fuel poverty.

As with social security benefits, it was recognised that older people may not be aware of their entitlement to energy efficiency schemes, and if they are aware, they may be

unsure of how to and to whom to apply. As one steering group representative commented:

“I think we’ve learnt the lesson that it’s not just enough to hand an older person a leaflet and say “there you go, you apply for that grant” and think that that will be the end of it. Some people do need help, advice and support of a project worker and more importantly the community needs to be informed and engaged and reminded about how important that all is.”

The comments householders made indicated that the support they received from the project worker had been crucial:

“That’s more than I ever got from anybody else, because normally it’s “we’ll be in touch”, but [the project worker] was true to his word.”

From the users’ perspective, having someone to help them through the process and provide the relevant information had in many cases been instrumental for them to have energy efficiency measures installed.

3.3 Barriers to engagement

Few of the potential barriers identified by the Steering Group were referred to in the interviews. This may be due to the project worker putting householders at ease by addressing these issues during his early visits to each home. Furthermore, some may not have engaged with the project due to their concerns and hence would not be among the interviewees. It could also be because they were not, in fact, real barriers. From the project worker’s regular updates to the Steering Group it is clear that some of the people that he talked to within local community groups were reluctant to engage in the process. A number of those who did meet the eligibility criteria

chose not take up what was on offer, often stating they were happy with their existing heating system.

Excerpt from the Project Worker’s update

Twenty two people were present when I spoke at the lunch club. Of these, ten had oil-fired central heating, seven had gas, three had Economy 7, one had normal electric fires and one had a solid fuel glass fronted fire. The lady with the fire was very happy with it and has no intentions of having it removed. She can still manage it herself and despite her friends’ explanation of how easy it was to control a gas central heating system, she would not change her mind. She would be entitled to Warm Homes Plus measures.

Concerns over perceived disruption during the installation process had been identified as another potential barrier. Householders who had received heating conversion, however, relayed little concern or accounts of unexpected disruption to their homes while the work had been carried out:

“[There was] a wee bit of disturbance here, but it was explained.”

“Ah, no, they did it in a day. You know, they tidied up most of it.”

Only one person reported disturbance to her home. When asked if she would still recommend to others to have energy efficiency measures carried out, she responded emphatically *“yes I would definitely”*.

None of those waiting on measures to be installed reported concerns as to potential disruptions, and there were no reports about concerns or difficulties with the application process, although some did comment on how

Chapter 3: Project Outcomes

they had relied on the project worker to fill out the necessary forms:

“I went ahead, so she told me what to do, but she really done all the filling of the forms in and then she did all the trouble for me that I wouldn’t have known how to do.”

The issue of older people being reluctant to engage due to concerns over losing their home help did not emerge in any of the interviews with householders. The project worker further explained that he had not come across this in any of the dealings he had with householders, neither with those who did engage with the project nor with those who chose not to. There were instances where the project worker was unable to assist people who were interested but who did not meet the project criteria. This could at times be a cause of frustration, which was recognised by steering group members:

“I feel that sometimes that [the project worker] possibly is quite frustrated by the boundaries in terms of who he can help and who he can’t.”

Excerpt from Research Field Notes

Mr Jackson lives in a mid terrace house with only an open fire for heat and a hot water geyser. Although I visited Mr. Jackson’s house in August, it still felt cold and damp: I can only imagine what it must be like in the depths of winter. The tape transcription clearly highlights the impact of poor heating on Mr. Jackson’s health and on his quality of life. Mr Jackson is also waiting to be called for a triple bypass. Unfortunately, because Mr. Jackson invested in a private pension fund, which gives him approximately £33 extra a month, he is not entitled to means tested benefits and thus is not entitled to Warm Homes Plus. He is not in the financial position to carry out the measures himself, or he would have done so, he said.

3.4 User Involvement

Community representation and user involvement in the Steering Group was raised by several of those interviewed. Some expressed how older people may feel intimidated at such meetings. In their view representatives from interest organisations such as Engage with Age and Age Concern were in a good position to speak on behalf of the target group. This view, however, was not shared by all members, and some indicated that the lack of community representation meant that there was nobody truly advancing the community’s perspective:

“There was never anyone from the community groups involved which was another big gap, I may work for a community based organisation, but I don’t represent a local neighbourhood.”

One steering group member, who shared this view, expressed how the lack of user representation might have impacted on the way in which the steering group was connected to ‘the ground’.

“This has made the project steering group become more and more obsolete in a way, because it has become more distant from the reality of the work of the project whereas if they’d had some community members on board it would have kept the whole thing fresh and dynamic.”

Several interviewees expressed that as a result of this lack of ‘grounding’, increased effort had to be put into building relationships with local groups to ensure that the project would be acceptable to local people:

“You can’t go into a community without paying your respects to the people who are there and, you know, building up the relationships; personal relationships with the key players in every community are really important.”

In a fuel poverty programme run by the Armagh and Dungannon Health Action Zone, the participation of local people was central in programme delivery²⁷ and the evaluation of that programme found that the participation of local people had significantly enhanced its overall outcomes²⁸.

3.5 The importance of an enabler on the ground

The importance of having a project worker was expressed in all interviews, and he was described as having been instrumental in the development of the project. His enthusiasm, energy and ability to relate to people were frequently pointed out as key factors in project delivery and a reason why people put themselves forward to receive energy efficiency measures who might otherwise not have done so:

“He has gained the trust and respect of a lot of individuals who perhaps wouldn’t have come forward at all. Stuff like that has been key.”

A number of those interviewed stated that without the ‘hand-holding’ approach provided by the project worker many would probably still be living in poorly heated conditions, paying expensive fuel bills and experiencing a poorer quality of life. Several householders made comments to this effect:

“I probably would have just scrubbed it straight and plainly [had it not been for the project worker following through on my behalf].”

Steering group members also commented that without a dedicated member of staff the engagement with community and voluntary organisations on the ground, might have been less successful:

“He found out where pensioners groups were meeting, he found out where community associations were meeting, what activities they’d laid on for the elderly.”

One householder, who had gas central heating installed in her house explained that she would not have been aware of her entitlements had it not been for her involvement in a local organisation at the time the project worker visited:

“Well, I started going to a little club about a year ago.. Q: And that is where you met [the Project Worker]? A: Yes, indeed, I think I was the only one that put my hand up that didn’t have central heating... I then had a few words with him, and he has been very supportive, I must say.”

The importance of an enabler who acts as a conduit for communication and supports householders through a process of change has been identified in other fuel poverty interventions²⁸. Certain skills and personality types in carrying out such work, particularly in terms of developing open channels of communication between organisations from a range of sectors, has been recognised in the literature on intersectoral working^{29, 30} and in several recent evaluations of community development approaches to health in Northern Ireland^{31, 32}.

3.6 The impact of a local infrastructure

During the project period, the project worker was in contact with a wide range of local organisations. A substantial amount of time and effort went into networking and general information work, which, according to the interviewees helped build capacity among individuals and organisations. The training session with Trust staff also raised levels of

t’s “we’ll be in touch” but the project worker was true to his word.”



awareness around the issue of fuel poverty, and established links between frontline Trust staff and the Warming Up project.

Excerpt from the Project Worker's update

I was able to introduce the project informally to the Care Management Team at [name of institution] and left leaflets for them. I have since carried out a home visit with one of the team members and am waiting to refer a client to Eaga, once she has discussed it with her family. I have added the Care Management Teams to my email list to keep them informed.

The number of referrals emerging was, in the view of the project worker, somewhat limited, and he expressed that it was, at times, difficult to get people to engage in spite of the apparent attraction of what is on offer:

"You think that when you're going into a room [presenting the Warm Homes Scheme] there's going to be hundreds of people [interested]...well, there hasn't been. I realised that it's difficult to find people who fit the criteria and find people who want to get involved."

The project worker believed that the low level of interest was intimately linked with people's awareness of their entitlements; if people do not take up benefits because they are unaware of their entitlements, they will also lose out on the schemes that require them to be in receipt of those benefits. The considerable effort put in to raise awareness among local groups may reap rewards in the longer term and interviewees working in community organisations explained that, as a result of the work carried out by the project worker, they were now better able to advise people about their benefit entitlements and how to obtain relevant information:

"With the information we got from him...we were able to tell them [club members] what to apply for and they've went and applied for some of them and some of them have got attendance allowance."

The project's approach to local joined-up working was reflected in the project worker's updates to the steering group.

Excerpt from Project Worker's update

I met with [name], community worker, to discuss the project and explain how it could help those that use this club. There is a number of on-going groups that use the building, such as computer course for older people and an arts and crafts group. They also organise regular tea dances in the local church hall. I left project leaflets and returned a few days later to drop off some Warm Homes information. We also discussed the problems he has had in the past promoting schemes that require some form of benefit entitlement. He has found that people switch off once they hear the word 'benefit' and although they could be entitled to benefits they are reluctant to apply. I explained the working relationship with East Belfast Independent Advice Centre (EBIAC) and asked him to encourage people to talk to me and perhaps we could have benefit health checks carried out.

The Warming Up partners reported increased joint working in the area and that the new links with community groups and voluntary organisations had been very useful.

Excerpt from the Project Workers update

I met a lady at [name] Senior Citizens Club who informed me that she was concerned about a neighbour. She took some information to pass to him and he contacted me a few days later. He lives in a first floor flat with a glass-fronted fire but all the other flats had gas central heating installed prior to him moving into the block. Unfortunately for him the previous tenant would not allow NIHE access to the flat to carry out the heating replacement. I went to visit him, he is in his mid-sixties and still healthy enough to manage the coal fire. However, he has to buy coal at the garage, bring it to the block in his car, and carry each bag up the stairs through the flat to the balcony where it is stored in a small bunker. He has been unable to get a coal man to deliver the coal as it is difficult to get it up to the first floor and drop a large bag of coal into the small bunker. I completed the NIHE's Heating Evaluation Form and sent it through to the Welfare Team, followed by an e-mail to the Heating Evaluation Officer explaining the situation. Although he did not meet their strict criteria for a replacement, the officer was able to contact a project manager involved in a replacement scheme in a nearby area and get his flat included.

The man in this example was one of the householders who were interviewed as part of the evaluation. In the interview he explained that he was thrilled to have gas central heating installed, and that it had transformed his life.

"I would have done anything to have gotten the gas in! My life doesn't revolve around lighting a fire anymore."

3.7 Summary

Based on the data collected, it is clear that the project fulfilled its objectives set out in chapter 2. A capacity has been created to help older people in the catchment area avail of services, and 85 households have had tangible benefits to their homes, making them warmer and healthier. A large number of people have also received energy efficiency advice, and some had a benefit health check as a result of the project. There has been a range of benefits to the partner organisations and to locally based community and voluntary organisations.

The steering group members applauded SEBT for their foresight in providing the funding for the post of a project worker, without which the project outcomes would not have emerged. The commitment, professional attitude and personality of the project worker were identified as instrumental in achieving the objectives.

It was clear from the interviews that the Steering Group partners believed that it was now time to reflect on the learning that had emerged and to discuss how best to take this learning forward. This will be the topic of the remainder of the report.

Chapter 4: Looking forward

The steering group agreed that all decisions regarding how to bring the learning forward should be made with reference to the current policy environment. This chapter therefore begins with a brief outline of current public policies that are of relevance to energy efficiency and fuel poverty, providing the backdrop for a discussion around possible ways forward, as identified by the steering group.

4. 1 Policy Context

UK Fuel Poverty Strategy 2001

The UK Fuel Poverty Strategy was launched in November 2001 by the Department for Trade and Industry (DTI) and Department of the Environment, Food and Rural Affairs (DEFRA). The overall aim is to end fuel poverty for vulnerable households in the UK by 2010³³. There are separate interim targets for England, Scotland, Wales and Northern Ireland. The target for Northern Ireland includes assisting at least 40,000 households experiencing fuel poverty by 2006 through the Warm Homes Scheme and various partnership programmes³³.

The Domestic Energy Efficiency Regulations (Northern Ireland) 2002

The Domestic Energy Efficiency Regulations (Northern Ireland) 2002 replaced the previous regulations from 1994. The regulations enable the Department for Social Development (DSD) to provide grants to improve energy efficiency for people on low incomes and people in receipt of benefits relating to poor health. The regulations specifically set out the conditions, management and eligibility for the Warm Homes scheme.

The Warm Homes Scheme

The Warm Homes Scheme came into operation in July 2001. Funded by DSD and managed by Eaga Partnership Ltd., the primary objective of Warm Homes is to reduce the extent of fuel poverty in the private housing sector, especially among vulnerable households. The grant (worth up to £750) enables a number of energy efficiency measures to be installed, including loft and cavity insulation and draught proofing. Eligibility is restricted to households which receive one of a number of specified benefits.

A higher level of grant (up to £3,700) known as Warm Homes Plus, is available for the over 60's in receipt of specified benefits. Recipients of this grant are entitled to the installation of central heating systems in addition to the other measures.

If the total cost to a dwelling exceeds the limit set, the additional costs are covered by the Customer Energy Efficiency Levy Fund (see below). The budget for the Warm Homes scheme is being increased significantly from £3.78m in 2001-2002 to £11.9m in 2004-2005. An interim evaluation of the scheme was carried out by NEA NI in 2003 the results to which remain unpublished.

Ending Fuel Poverty: A Strategy for Northern Ireland

In November 2004, the DSD published a fuel poverty strategy for Northern Ireland¹. The strategy emphasises the importance of working in partnership and, depending on the availability of resources, aims to eliminate fuel poverty among vulnerable households by 2010 and in all households by 2016. Vulnerable households are defined as 'one that contains an elderly person, someone living with a disability or

long-term illness, or a family with one or more child under 16¹. The strategy identifies a range of areas where activities are needed if the targets are to be met, some of which include:

- Raising public awareness of the key issues.
- Facilitating research and policy development.
- Safeguarding the interests of energy consumers.
- Promoting domestic energy efficiency.
- Providing direct advice to the public on energy matters.
- Maximising the incomes of vulnerable people or those at risk of fuel poverty.
- Improving the quality of energy efficiency of Northern Ireland's housing stock (both the social and private housing sectors).
- Promoting innovation in domestic energy supply and efficiency.
- Promoting an energy efficiency strategy and co-ordination¹.

The strategy does not include an action plan in relation to how these areas of activities should be taken forward to reach the stated targets. The Warm Homes scheme together with the stock maintenance and improvement programme of the NIHE are the most significant programmes within the strategy. And additional funding of £12 million has been secured for these schemes for 06/07 and 07/08.

Fuel Poverty Partnership Projects

DSD has funded a number of smaller area based fuel poverty projects in partnership with other organisations. These include the Beechmount Energy Efficiency and Environment Scheme, Armagh & Dungannon HAZ: Home is where the Heat Is and the Foyle Energy Efficiency Project. In the current year, 05/06, DSD is part funding a number of partnership area based fuel poverty schemes such as Cosy Homes, Strabane

Smokeless Scheme, NEA Warmstart project and the Northern Neighbours HAZ: A Warmer Neighbourhoods Project. DSD recognises the importance of these schemes and hopes to continue funding such schemes in the future.

Investing for Health

Launched in 2002, Investing for Health³⁴ is the current public health strategy for Northern Ireland. Implemented through four Investing for Health partnerships, it makes an explicit attempt to shift emphasis from treatment to prevention, and signifies a commitment to tackling health and social inequality, making it consistent with the Northern Ireland Executive's commitment to New Targeting Social Need and the equality agenda. The strategy acknowledges the link between fuel poverty and health, and aims to lift 8,000 vulnerable households out of fuel poverty annually. It expects that:

- 20,000 homes will have benefited from Warm Homes by December 2004.
- 40,000 households will have been assisted by 2006 through Warm Homes and associated partnership programmes.
- Information and advice will be available to the public through a 'Keep Warm Keep Well' campaign and various other local campaigns.
- There will be a 34% improvement of the energy efficiency of the housing stock across all tenures over the following decade following the launch of the strategy.

In the Eastern Health Board area, which includes the catchment area of the Warming Up project, the Eastern Investing for Health Partnership is fully engaged in developing local action on fuel poverty.



Health Action Zones

Health Action Zones were introduced in England and Wales in 1998 as pilot projects that would explore new way of improving health and reducing health inequalities through area based partnerships³⁵. From 1999 Health Action Zones were set up in Northern Ireland, and there is now one such zone in each of the four health board areas. While being very different from each other in terms of remit and focus, the four zones work in close cooperation with the IFH partnerships. All four Health Action Zones are involved in work to alleviate fuel poverty:

- North and West Belfast HAZ: Beechmount Energy Efficiency and Environment Scheme. This project is complete and was evaluated by the University of Ulster⁹.
- Armagh and Dungannon HAZ: Home is where the heat is. Phase I of this project is completed and was evaluated by the Institute of Public Health²⁸. A second phase of the project is currently underway.
- Northern Neighbourhoods HAZ: A Warmer Neighbourhoods Project is currently underway.
- Western HAZ has undertaken a research project into older households who fall outside the eligibility for the Warm Homes Scheme. The report, Warming the West is likely to be published in 2005.

Northern Ireland Housing Executive activities

The Northern Ireland Housing Executive (NIHE) became the Home Energy Conservation Authority for Northern Ireland in 1996 with a remit to reduce energy consumption across the residential sectors. NIHE has developed a strategy to deliver substantial progress towards the target of 34%

energy efficiency improvements as set out in Investing for Health. Structural improvements to the housing stock owned by the NIHE are incorporated into regular maintenance. In meeting the targets for privately owned houses, NIHE has over the last number of years been engaged in a range of locally based projects. This is in line with their action plan Housing and Health: Towards a Shared Agenda³⁶ which, among other things, includes a commitment to working with the Health Boards.

Customer Energy Efficiency Levy Fund

In 1997, an Energy Efficiency Levy fund was established which redistributes small contributions charged of NIE customers. The fund primarily supports projects that provide ‘whole house’ solutions to improve energy efficiency. Applications for contributions can be made to the fund, which is managed by NIE on an annual basis.

Neighbourhood Renewal Strategy

The Neighbourhood Renewal Strategy was launched in 2003 by the DSD³⁷. This strategy focuses on including community participation in a renewal of the most disadvantaged neighbourhoods and includes a particular focus on partnership work.

Emerging issues

IPH and NEA NI were recently commissioned by the Energy Saving Trust to produce a strategic review of the Health and Personal Social Services (HPSS) sector in Northern Ireland for the Energy Efficiency sector ³⁸. This review highlighted some recent developments (in addition to those mentioned above) within the health sector that may be of relevance to initiatives seeking to tackle fuel poverty.

Priorities for Action 2004/2005³⁹ sets out the agenda for the Health and Social Services based on the targets in the Secretary of State's Priorities and Budget. It requires each Health and Social Services Board to produce a Health and Well-being Investment Plan, which among other things should include plans for dealing with winter pressure.

Introduced in 2002, Local Health and Social Care Groups (LHSCG) are multidisciplinary partnerships set up by the Health Boards to address local primary care issues. The LHSCGs will increasingly become responsible for the commissioning of services on the interface between primary and other services. Given the very local nature of the LHSCG's focus, these partnerships provide an opportunity for local people to become involved in the process of commissioning services and setting directions at a local level.

A new contract for General Practitioners was also recently introduced and took effect from April 2004. This contract includes specific targets on conditions that are linked with living in cold, damp and mouldy houses, such as stroke, asthma and mental health. Furthermore, there are a wide range of statutory, voluntary and community organisations directly involved in tackling fuel poverty in Northern Ireland, described elsewhere^{9, 13}.

4.2 Reflections on the way forward

Based on the interviews with Steering Group members and external stakeholders, several potential ways in which to develop the project further emerged:

- Some indicated that they expected the project to come to an end, but that the

networks, partnerships and learning should be captured to benefit the participating organisations and future similar projects.

- Others indicated that they hoped the project would continue in a more modest format, perhaps with a part-time worker in place, but with more community involvement at steering group level.
- Another way forward was identified as continuing the project at the current scale, but extending the target group to include, for example, lone parent families or families with young children.
- Some saw other ways of extending the remit of the project. For example, it could be extended to incorporate other health promotion issues such as 'home safety checks', thus creating synergy in terms of staff resources and time. The project could possibly continue to run within the Trust, but only if partnership links were developed with existing projects in the south and east Belfast and Castlereagh area.
- As another way of expanding the project, but not in terms of widening the target group or the remit, it was suggested that a future project could cover a wider geographical area, perhaps in conjunction with the Investing for Health initiative at Health and Social Services Board level.

These possibilities provided a starting point for a full discussion on the range of options at the research seminar in October 2004. Four fundamental features for a future project emerged from the seminar:

- The need for a project must be established.
- Funding will be required.
- Committed partners should be brought on board.



- The project must be realistic within the policy environment.

Establishing need

- A needs assessment was seen as essential to ensure that there is real need for the continuation of a project of this nature and that the referral rates will be sustained. Area based data as well as data on individual circumstances will be required. Given their expertise and experience in this area, the possibility of working in partnership with NIHE on this issue was pointed out.
- It was recognised that there are large numbers of people living in fuel poverty who are not eligible for current government schemes. There was full agreement of the importance of keeping this group in mind when considering future work. A flexible approach to eligibility criteria was seen as having potential to ensure that people just above the benefit threshold are not excluded.

Funding

- It was envisaged that the project would continue to refer households to the Warm Homes Scheme, and funding for this scheme will therefore be crucial. Warm Homes has currently secured funding for another two years, but it was considered likely that funding will be extended to 2008. It was recognised that additional programme funding would be required.
- The considerable contribution made by SEBT in terms of funding and risks involved in initiating a pilot project was recognised. It was considered unlikely, however, that the Trust could continue to provide core funding for a future project.

- Several relatively new funding streams were identified. For example the LHSCG is currently providing interim funding to extend the project for a short period to identify and support families with young children who are eligible for Warm Homes insulation. Other funding sources may include the Energy Efficiency Levy Fund and the Energy Saving Trust Innovation Fund. It was envisaged that some resources (financial or in kind) could be made available through the partnership that would be established to oversee the project.

Potential partners

There is a wide range of organisations and sectors that have a vested interest in the outcomes of energy efficiency interventions (see scoping exercise in chapter 5), and therefore may be interested in becoming partners in a project with great potential for achieving such outcomes. Some central partners were identified:

- Given the central role NEA NI plays in the work on fuel poverty across Northern Ireland, it was suggested that they may be best positioned to be the co-ordinating partner and the employer of project staff.
- The LHSCG was identified as an organisation that may have particular interest in taking part in this work. The evolving agenda of the LHSCG may offer opportunities for addressing fuel poverty.
- Given the fuel poverty targets in the Investing for Health strategy, the Eastern Investing for Health Partnership may be a key enabler.
- NIHE currently invest substantial resources in energy efficiency initiatives and will

“The project should continue to include benefit checks and assistance”

continue to do so where sufficient funding remains available. While still committed to energy efficiency work, they see other governmental departments with fuel poverty targets as better placed to determine needs and provide funding.

- The Energy Efficiency Advice Centres play a pivotal role in delivering energy efficiency information throughout Northern Ireland and were identified as important partners.

The current policy context

The steering group discussed a range of issues that would provide opportunities or limitations for a future fuel poverty project. Some developments were seen as affording opportunities:

- At the time of the research seminar, the Fuel Poverty Strategy for Northern Ireland had not been finalised, but it was identified as providing a focus for future fuel poverty work.
- When the proposed water charges are being implemented, water poverty may become an issue among vulnerable households. Should this occur there may be potential for the two agendas to ‘piggy back’ on each other.
- The fuel poverty targets remain part of Investing for Health and the strategy will be important for future developments.

Some potential limiting issues were also identified:

- It was not envisaged that any fresh resources would be allocated to the fuel poverty strategy.
- The document out for consultation regarding an anti-poverty strategy for Northern Ireland indicated that there will

be no money allocated for implementation.

- It was recognised that a relatively ‘lean’ period for the HPSS lies ahead, and that this may impact particularly on preventative work, as the perception was that this is usually the first among the health services to be affected when budgets are tight.

4.3 Conclusion reached by steering group

With reference to all these factors, it was agreed that the preferred option for a future project would:

- Remain focused on fuel poverty as opposed to diversifying into other areas.
- Extend beyond the south and east Belfast and Castlereagh area on an opportunistic basis based on the partners that come on board.
- Most likely receive funding from a range of sources.
- Target those who are eligible for the Warm Homes Scheme and also those who live in fuel poverty but who fall outside the eligibility criteria.



A scoping exercise, establishing the potential benefits of locally based energy efficiency projects to organisations from all sectors, was carried out to inform decisions about future developments and is outlined in this chapter.

5.1 The Fuel Poverty Strategy and Warm Homes

DSD aims, subject to available resources, to eliminate fuel poverty by 2016. The strategy indicates that locally based projects will help towards achieving this aim¹.

- Through the strategy the DSD commits itself to engage a wide range of partners in fuel poverty work and identifies local projects as one central delivery mechanism for the strategy. The DSD lists organisations they see as key partners in the implementation of the strategy¹. The success of the DSD's strategy can be judged by progress against their year by year milestone targets¹. Given the expressed emphasis on the uncertainties with regard to availability of resources, it will be in the DSD's interest to continue to support projects that seek to maximise existing resources.
- The DSD has contributed to a range of locally based fuel poverty projects over the last five years, and is currently involved in a number of projects including the Northern Neighbourhoods HAZ's Warmer Neighbourhoods Project, Help the Aged scheme, Strabane fuel poverty/air quality project, Cosy Homes, Cosy Homes for Sheltered schemes, Northern Investing for Health and Armagh and Dungannon HAZ fuel poverty project.
- In the Strategy, DSD specifically mentions that they *'will ask the Warm Homes Scheme manager to bring forward proposals for more*

*intensive marketing of the scheme in those areas that have the most severe problems with fuel poverty'*¹. It also calls for community leaders to assist in the identification of people in need. This is another clear recognition of the value of local projects. As manager of the Warm Homes project, Eaga will have a central role to play in such work. All referrals to Eaga are currently recorded by postcode to ensure that the areas of least uptake are targeted. The Warm Homes scheme may benefit even further from adopting a community engagement approach, which has been shown to reach the hardest to reach group in ways that have proven difficult by other means²⁸.

5.2 Benefits of health gains

The benefits of reductions in excess winter deaths and morbidity associated with fuel poverty are obvious in terms of human and economic costs. There are specific potential benefits to organisations and initiatives:

- For the HPSS the reduced costs associated with decreases in the need for services (for example fire lighting, hospital beds, home visits, prescription drugs) represent a huge potential saving and, as mentioned above, these savings alone could outweigh the costs of housing improvements¹⁶.
- The new GP contract includes specific targets on conditions that are linked to fuel poverty. GPs and their patients may therefore mutually benefit from the involvement of GPs in fuel poverty schemes. GPs have been involved in other schemes in the form of 'prescribing' warmer homes. Given the central role of GPs in primary care, the information and guidance provided by GPs to patients is invaluable.

“ Consideration should be given to eligibility criteria to ensure that

- Each health board is required to present plans for dealing with winter pressure. It may be of strategic advantage to focus some of this work on the alleviation of fuel poverty as this has the potential to reduce winter pressure in a sustainable way. Priorities for Action ³⁹ also requires the boards to produce plans for how they will include community development approaches in their service delivery. Involvement in community based energy efficiency projects can meet both these requirements.
- The IFH partnerships and the Health Action Zones may be the most natural mechanisms for the involvement of the Health Boards. The IFH strategy includes specific targets on fuel poverty, and as such the IFH partnerships, the Boards and the DHSSPS have a vested interest in reductions of the number of people living in fuel poverty as it will impact on their performance. All four Health Action Zones have indicated that they are committed to working towards combating fuel poverty. Based on the IFH objectives and targets, the Eastern IFH Partnership is fully engaged in developing an overarching fuel poverty strategy action plan for the Eastern area.
- Fuel poverty is linked to poor mental health, and improvements to mental health manifest themselves quickly after energy efficiency interventions have been carried out. Fuel poverty projects may therefore be of interest to those working in the mental health field, and specifically for those involved in the implementation of the Mental Health Strategy for Northern Ireland.
- LHSCGs will increasingly be involved in the local commissioning of health services. Since fuel poverty is linked with ill health, it

follows that the alleviation of fuel poverty has the potential to prevent ill-health. Involvement in fuel poverty schemes may be a strategically important and cost-effective approach to commissioning services.

5.3 Housing improvements

Addressing fuel poverty by installing energy efficiency measures in homes may be of benefit to those with responsibilities for housing and neighbourhood renewals:

- NIHE has responsibility for reducing energy consumption across the residential sectors. They will therefore have vested interest in fuel poverty initiatives among all householders. NIHE has various strategies in place, and a commitment to working with the Health Boards. By engaging in local energy efficiency interventions some of their aims can potentially be addressed.
- There are a number of housing associations that have their own home improvement plans and could benefit from the expertise and experience of a partnership focused on energy efficiency improvements.

5.4 Anti-poverty and rights based issues

Fuel poverty is intrinsically linked to low income and poverty. It has been demonstrated that some households on low income spend more than 10% of their income on fuel even after having central heating and insulation installed ²⁸. This suggests that the impact of income on the levels of fuel poverty is significant. NIHE ¹⁸ has shown that an increase in household income has greater potential for reducing the levels of fuel poverty compared to reductions in fuel costs or heating conversions.



A focus on maximising benefit uptake as a means to increase household income, as promoted through the Warming Up project, will tie in with the work of a range of organisations:

- A focus on the rights of citizens and on benefit maximisation is a key concern for advice centres such as the Citizens Advice Bureaux and the independent advice centre. Various community and voluntary organisations also work to promote such rights. Statutory agencies, such as the Social Security Agency and the General Consumer Council (GCC), have further responsibilities for citizens' rights. The GCC represents oil, coal, gas and electricity consumers and taken a great interest in fuel poverty over the last few years⁴⁰. The Social Security Agency is promoting benefit uptake among people of working age, pensioners, people with disabilities and carers to ensure that their customers get all the benefits and services to which they are entitled.
- The Office of the First Minister and the Deputy First Minister consulted recently on a draft anti-poverty strategy for Northern Ireland. Such a strategy is generally welcomed in principle, although the content of the proposed strategy has been heavily criticised⁴¹. There is an opportunity for Government to link the Anti-Poverty Strategy with the Fuel Poverty Strategy, which could strengthen both strategies and produce better outcomes for those suffering the effects of poverty.
- Social exclusion among older people is a concern for organisations working for this population group. Organisations such as Engage with Age and Age Concern were involved in the Warming Up project. Energy efficiency interventions have the potential

to reduce social exclusion and it will serve the purposes of such organisations to engage in such projects. Should the future project widen its scope to include other population groups there will be a wider range of other organisations that could benefit.

5.5 Environmental issues

- The Neighbourhood Renewal Strategy has a focus on disadvantaged neighbourhoods and seeks to include community participation in its implementation. The improvement of housing stock through fuel poverty intervention programmes represents one way of achieving this. There is potential for synergy between DSD's targets in terms of neighbourhood renewal and fuel poverty.
- Northern Ireland Electricity (NIE) has specific targets with regard to reductions of carbon emissions and energy consumption in Northern Ireland. NIE has in the past taken part in local projects, which have contributed to both these targets.
- Some householders on low incomes experience disconnection from their energy source as a result of being unable to pay for energy. Self disconnection can have dramatic effects, particularly during winter, as people may be left without any means to heat their home. Disconnection for non-payment of bills is rather infrequent in Northern Ireland and is not carried out by NIE. It is in the interest of both fuel suppliers and customers to avoid such situations. Appropriate methods for paying fuel bills (for example local savings or stamp schemes) could be established through local partnerships, providing stability in fuel supply for the customers and in the customer base for local suppliers.

Chapter 6: Conclusions and recommendations

The overall aim of the Warming Up project was to create a local infrastructure that enables older people to access the support and services they require to achieve affordable warmth. A set of objectives to achieve this was identified. Based on the evaluation it is clear that the Warming Up scheme has achieved its stated objectives. This chapter summarises the main conclusions and sets out recommendations for the future derived from discussions among the Steering Groups members.

6.1 Project outcomes

Internal and external stakeholders highlighted the newly created links between those working in the health field and those working in the energy efficiency sector as a positive outcome of the project. This was pointed out as being particularly noticeable through the learning that had taken place within the health sector. Community groups also stated that they had benefited from developing new relationships with service providers.

As a result of the project, 85 homes are now more energy efficient. These homes can now be warm and healthy places to live for people who are among those most vulnerable to the effects of living in cold and damp conditions. Householders expressed that some of them would not have known about the support available had it not been for the project. A further 700 people received energy efficiency advice and information.

Householders referred to the financial benefits of the project both in terms of savings on fuel costs and as a result of being made aware of and assisted to take up benefits to which they were entitled. Some made reference to improvements in conditions that can increase mental well-being and social inclusion.

At the outset, the steering group identified a set of potential barriers and ways in which to

overcome them. Based on the feedback from householders and community representatives, these barriers were either not apparent (such as the fear of losing home helps) or they were overcome. The most significant element within the project model, as expressed by most interviewees, was the role of a full time project worker who provided support to the individual householders and created links between a range of local community, voluntary and statutory organisations and those administering the various schemes at a local level.

How best to secure community participation, raised some disagreement. While some thought the view of the community was best represented through voluntary organisations, others maintained that members of the local communities themselves should be present at the partnership 'table'.

Criteria for project eligibility was identified as a challenge to the implementation of the project 'on the ground'. For example, people who were just above the threshold for certain benefits could not be referred to Warm Homes even if they were clearly living in fuel poverty. Through interviews and the research seminar it became clear that the partners wished to ensure that a future project would have the capacity to cater for this group. In short, the Warming Up Steering Group expressed a clear wish to develop a future project that would:

- Remain focused on fuel poverty as opposed to diversifying into other areas.
- Extend beyond the south and east Belfast and Castlereagh area on an opportunistic basis based on the partners that come on board.
- Most likely receive funding from a range of sources.
- Target those who are eligible for Warm Homes, and also those who live in fuel poverty but who fall outside the eligibility criteria.



The Steering Group identified that clarification of local needs, availability of resources and commitment from partners within the current policy environment would be a necessary first step to establish the feasibility of a future project. In particular, if a future project should target those outside the Warm Homes criteria, additional resources would be required.

6.2 Recommendations

Taking the learning forward

It is envisaged that the following recommendations will assist in establishing the feasibility of continuing with the project:

- The steering group should circulate the evaluation report to all stakeholders (including those identified in chapter 5) emphasising the effectiveness of locally based projects in making homes warmer and healthier and the potential for synergy between a range of initiatives.
- A seminar focusing on these issues, to which selected stakeholders are invited, should be held. This could help clarify issues and spark interest for partners to come on board.

Maximising outcomes for householders

With regards to a future project, it is recommended that this is designed in a way that would maximise the outcome for householders. Specifically it is recommended that:

- The participation of local people and community groups is central to programme planning and implementation.
- The role of an enabler on the ground should continue.
- The project should continue to include benefit checks and assistance with benefits

applications to maximise uptake and increase household income.

- Careful consideration should be given to eligibility criteria to ensure that people on low incomes just above the threshold for social security benefits are catered for. A flexible ‘people centred’ approach, which takes into account the circumstances of individuals and households living in fuel poverty, should be applied.
- Links with local health care providers should be developed in order to raise awareness and assist the health sector in identifying people in fuel poverty.

Furthering the evidence base

A future project has the potential to contribute to the evidence base on links between energy efficiency interventions and the health and economic situation of householders. It is recommended that information is collected systematically to maximise this potential:

- Data on income, health status (including data from GP records), use of services, indoor temperature and SAP ratings should be collected before and after intervention in order to determine which households have been lifted out of fuel poverty and what impact the intervention has had on indoor climate and health. To ensure consistency in the data collection and to increase the potential for furthering the existing evidence base, it is recommended that research instruments are developed with reference to those applied in other fuel poverty projects, for example the recent evaluation of the Warm Front scheme in England. It is also recommended that links are established to a research project currently being developed by the Combat Poverty Agency and Sustainable Energy Ireland.

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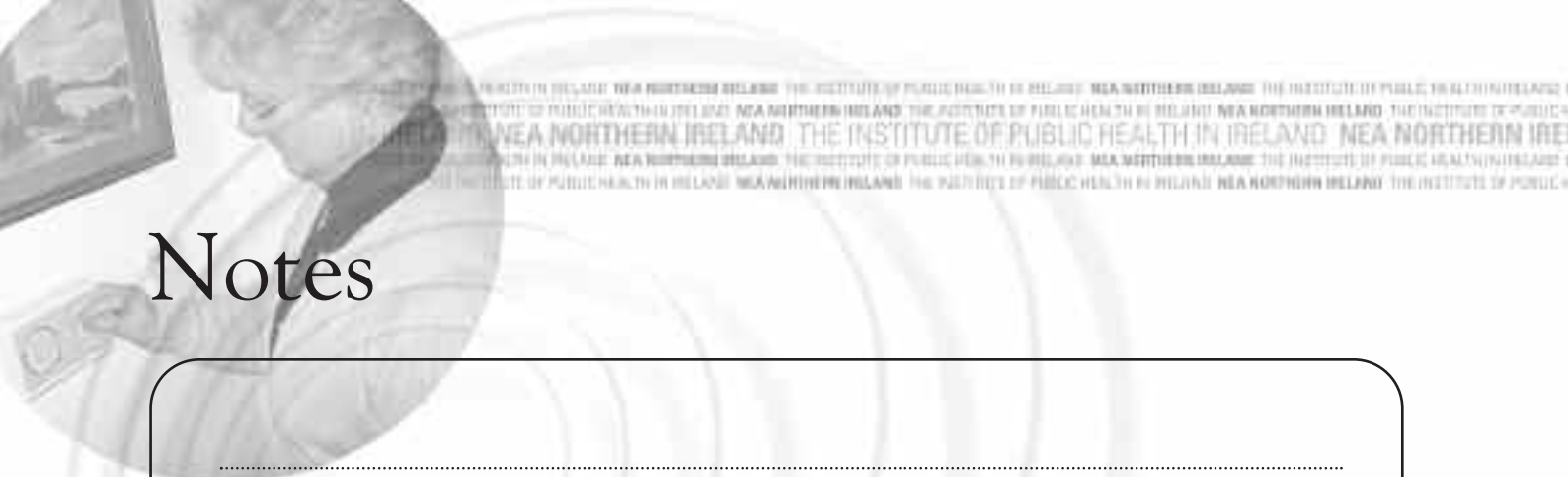


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Notes

A large rectangular area with rounded corners, containing 25 horizontal dotted lines for writing notes.